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Image# 201601319005238084

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

FORIVI 3X For Ot	her Than An Autho	orized Committee	Office	Use Only
NAME OF TYPE (COMMITTEE (in full)	OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5	
KEEP THE PROMISE III				1
I P.O.	BOX 92225			
ADDRESS (number and street)	BOX 92223			
Check if different than previously reported. (ACC)	STIN		TX 787	09
2. FEC IDENTIFICATION NUMBER	CITY	^	STATE ▲	ZIP CODE ▲
C C00575423	3. IS RE	THIS NEW (N) OR	AMENDEI (A)	D
4. TYPE OF REPORT (b) (Choose One) (a) Quarterly Reports:	Report Due On:	20 (M2) May 20 (M5) Jun 20 (M6)		Year Only) Dec 20 (M12) (Non-Election
April 15	Apr 2	0 (M4) Jul 20 (M7)	Oct 20 (M10	Year Only) Jan 31 (YE)
Quarterly Report (Q1)	(c) 12-Day	Primary (12P)	General (12G)	Runoff (12R)
July 15 Quarterly Report (Q2)	PRE -Election Report for the:	Convention (12C)	Special (12S)	
October 15 Quarterly Report (Q3) X January 31 X Year Field Report (VF)	Floation	M = M / D = D /	Y . Y . Y . Y	in the
rear-End Report (YE)	(d) 30-Day	Off		State of
Report (Non-election Year Only) (MY)	(d) 30-Day POST-Election Report for the:	General (30G)	Runoff (30R)	Special (30S)
Termination Report (TER)	Election	on//	Y Y Y Y Y	in the State of
5. Covering Period 07	01 2015	through 12		2015
I certify that I have examined this Repo	ort and to the best of n	ny knowledge and belief it is	rue, correct and comp	lete.
Type or Print Name of Treasurer JON	I FRANCIS			
Signature of Treasurer JON FRANCI	S	[Electronically Filed]		31 2016
NOTE: Submission of false, erroneous, or	incomplete information	may subject the person signing	this Report to the pena	lties of 2 U.S.C. §437g.
Office Use			FE	C FORM 3X Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISRUBSEMENTS

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name KEEP THE PROMISE III 07 2015 2015 Report Covering the Period: 12 31 From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 0.00 January 1, 2015 (b) Cash on Hand at 14994975.00 Beginning of Reporting Period..... 15398394.01 398394.01 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 15393369.01 15398394.01 6(a) and 6(c) for Column B)..... 3766149.72 3771174.72 Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 11627219.29 11627219.29 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) This committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

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				$\cdot \cdot \cdot$	1 / 1 1 1	-	

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees		4500005.00
(i) Itemized (use Schedule A)	28085.00	15028085.00
(ii) Heitaminad	170200.01	170309.01
(ii) Unitemized(iii) TOTAL (add	170309.01	170003.01
Lines 11(a)(i) and (ii)	198394.01	15198394.01
Zinos Tr(a)(i) and (ii)		
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	0.00	
(such as PACs)	0.00	0.00
(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry	198394.01	15198394.01
Totals to Line 33, page 5) Transfers From Affiliated/Other	130004.01	10.10001101
Party Committees	200000.00	200000.00
Tarty Committees	200000.00	7
. All Loans Received	0.00	0.00
_		
. Loan Repayments Received	0.00	0.00
. Offsets To Operating Expenditures	7	7
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	0.00	0.00
. Refunds of Contributions Made		
to Federal Candidates and Other		
Political Committees	0.00	0.00
Other Federal Receipts	0.00	0.00
(Dividends, Interest, etc.) Transfers from Non-Federal and Levin Funds	0.00	0.00
(a) Non-Federal Account		
(from Schedule H3)	0.00	0.00
(7	4
(b) Levin Funds (from Schedule H5)	0.00	0.00
(b) Levill Fallac (from Concadio Fro)	7	7 7
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	398394.01	15398394.01
. Total Federal Receipts		
(subtract Line 18(c) from Line 19)▶	398394.01	15398394.0°

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

. (Operating Expenditures: a) Allocated Federal/Non-Federal	Total This Period	Calendar Year-to-Date
	Activity (from Schedule H4)	0.00	0.00
	(i) Federal Share		
	(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating		
	Expenditures	3566149.72	3571174.72
(c) Total Operating Expenditures	2566440.72	2574474.70
7	(add 21(a)(i), (a)(ii), and (b))▶	3566149.72	3571174.72
	Fransfers to Affiliated/Other Party	200000.00	200000.00
. (Contributions to	1 20000.00	
+ 2	Federal Candidates/Committees and Other Political Committees	0.00	0.00
	ndependent Expenditures		
(use Schedule E)	0.00	0.00
. (Coordinated Party Expenditures 2 U.S.C. §441a(d)) use Schedule F)	2.00	
(use Schedule F)	0.00	0.00
	B Made	0.00	0.00
. L	Loan Repayments Made	0.00	0.00
	oans Made	0.00	0.00
. F	Refunds of Contributions To:	7	
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees		
	(such as PACs)	0.00	0.00
(d) Total Contribution Refunds		
((add Lines 28(a), (b), and (c))▶	0.00	0.00
	(add 2.1100 20(a), (b), and (0),	7	
. (Other Disbursements	0.00	0.00
		7	
	Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity		
	(from Schedule H6)	0.00	0.00
	(i) Federal Share	0.00	0.00
	(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely		
,	With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add		
	Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00
	Total Disbursements (add Lines 21(c), 22,	100000000000000000000000000000000000000	
2	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	3766149.72	3771174.72
. 7	Total Federal Disbursements		
	subtract Line 21(a)(ii) and Line 30(a)(ii)		
	rom Line 31)	3766149.72	3771174.72

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	198394.01	15198394.01
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	198394.01	15198394.01
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	3566149.72	3571174.72
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
8. Net Operating Expenditures (subtract Line 37 from Line 36)	3566149.72	3571174.72

Use separate schedule(s) for each category of the Detailed Summary Page

FOF	PAGE	6	OF	93				
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	13		14		15	16	6	17

or for commercial purposes, other than using	I Statements may not be sold or used by any pers the name and address of any political committee to	
NAME OF COMMITTEE (In Full) KEEP THE PROMISE III		
Full Name (Last, First, Middle Initial) LOWELL ANDERSON Mailing Address 2750 S LILAC		Date of Receipt
City BLOOMINGTON FEC ID number of contributing	State Zip Code CA 92316	11 06 2015 Transaction ID : SA11AI.7369 Amount of Each Receipt this Period 250.00
federal political committee. Name of Employer RETIRED Receipt For: Primary General Other (specify) ▼	Occupation RETIRED Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) B. ROBIN ARMSTRONG Mailing Address 1101 MAXI CIRCLE		Date of Receipt
City FRIENDSWOOD FEC ID number of contributing federal political committee.	State Zip Code TX 77546	09 26 2015 Transaction ID : SA11AI.7385 Amount of Each Receipt this Period 1000.00
Name of Employer INPATIENT CONSULTANTS Receipt For: Primary General Other (specify) ▼	Occupation PHYSICIAN Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) WILLIAM BANDOR Mailing Address 9134 LIMA ROAD City FORT WAYNE	State Zip Code IN 46818	Date of Receipt 09 25 2015 Transaction ID : SA11AI.7356 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer PREFERRED AUTOMOTIVE GROUP Receipt For: Primary General Other (specify)	Occupation CFO Aggregate Year-to-Date ▼ 250.00	250.00
SUBTOTAL of Receipts This Page (optional).		1500.00
TOTAL This Period (last page this line number	er only)	7

Use separate schedule(s) for each category of the Detailed Summary Page

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	Statements may not be sold or used by any persone name and address of any political committee to	
NAME OF COMMITTEE (In Full) KEEP THE PROMISE III		
Full Name (Last, First, Middle Initial) JEANNA BOURES Mailing Address 1919 GARY ROAD		Date of Receipt 1.1 09 2015
City STEWARTSVILLE FEC ID number of contributing	State Zip Code NJ 08886	Transaction ID : SA11AI.7370 Amount of Each Receipt this Period 250.00
federal political committee. Name of Employer MICHAEL BOURES Receipt For: Primary General	Occupation OFFICE MANAGER Aggregate Year-to-Date ▼	250.00
Other (specify) ▼ Full Name (Last, First, Middle Initial) JOHN BOWLING Mailing Address 916 REDLEAFE CIRCLE	250.00	Date of Receipt 09 30 2015
City CHESA FEC ID number of contributing federal political committee.	State Zip Code VA 23320	Transaction ID : SA11AI.7359 Amount of Each Receipt this Period 250.00
Name of Employer RESOURCE LIGHTING Receipt For: Primary General Other (specify) ▼	Occupation SALES REP Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) CHARLIE BOYD Mailing Address 900 JEFFERSON ST. SE City OLYMPIA	State Zip Code WA 98516	Date of Receipt 10 28 2015 Transaction ID : SA11AI.625
FEC ID number of contributing federal political committee. Name of Employer RETIRED Receipt For: Primary General Other (specify)	Occupation RETIRED Aggregate Year-to-Date ▼	Amount of Each Receipt this Period 100.00
SUBTOTAL of Receipts This Page (optional)		600.00
TOTAL This Period (last page this line number	er only)	

Use separate schedule(s) for each category of the Detailed Summary Page

	R LINE	PAGE	=	8	OF	93			
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	13		14		15		16	;	17

Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any personal e name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) KEEP THE PROMISE III		
Full Name (Last, First, Middle Initial) CHARLIE BOYD Mailing Address 900 JEFFERSON ST. SE		Date of Receipt M = M
City OLYMPIA	State Zip Code WA 98516	Transaction ID : SA11AI.712 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer	Occupation	50.00
RETIRED Receipt For: Primary General Other (specify)	RETIRED Aggregate Year-to-Date ▼ 310.00	
Full Name (Last, First, Middle Initial) CHARLIE BOYD Mailing Address 900 JEFFERSON ST. SE		Date of Receipt
City OLYMPIA FEC ID number of contributing	State Zip Code WA 98516	10 31 2015 Transaction ID : SA11AI.713 Amount of Each Receipt this Period 75.00
federal political committee. Name of Employer RETIRED Receipt For:	Occupation RETIRED	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 385.00	
Full Name (Last, First, Middle Initial) CHARLIE BOYD Mailing Address 900 JEFFERSON ST. SE		Date of Receipt 11 01 2015
City OLYMPIA	State Zip Code WA 98516	Transaction ID : SA11AI.714 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer RETIRED Receipt For: Primary General Other (specify) ▼	Occupation RETIRED Aggregate Year-to-Date ▼ 435.00	
SUBTOTAL of Receipts This Page (optional)	<u> </u>	175.00
TOTAL This Period (last page this line number	only)	

Use separate schedule(s) for each category of the Detailed Summary Page

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	Statements may not be sold or used by any persone name and address of any political committee to	
NAME OF COMMITTEE (In Full) KEEP THE PROMISE III	,,	
Full Name (Last, First, Middle Initial) CHARLIE BOYD Mailing Address 900 JEFFERSON ST. SE		Date of Receipt
City	State Zip Code WA 98516	12 02 2015 Transaction ID : SA11AI.722
OLYMPIA FEC ID number of contributing federal political committee.	WA 98516	Amount of Each Receipt this Period 50.00
Name of Employer RETIRED Receipt For: Primary General Other (specify) ▼	Occupation RETIRED Aggregate Year-to-Date ▼ 485.00	
Full Name (Last, First, Middle Initial) BILL BROWN Mailing Address PO. BOX 10349		Date of Receipt
City ZEPHYR COVE FEC ID number of contributing federal political committee.	State Zip Code NV 89448	10 26 2015 Transaction ID : SA11AI.7363 Amount of Each Receipt this Period 250.00
Name of Employer RETIRED Receipt For: Primary General Other (specify) ▼	Occupation RETIRED Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) MANUEL CAMBO Mailing Address 670 SOUTH MASHTA DRIV City KEY BISCAYNE	E State Zip Code FL 33149	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer SQUARE FOOT 401K LLC Receipt For: Primary General Other (specify) ▼	Occupation INVESTOR RETIREMENT INSURANCE Aggregate Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional)		1300.00
TOTAL This Period (last page this line number	r only)	

FOR LINE NUMBER: PAGE 10 OF Use separate schedule(s) (check only one) X 11a 11b 11c 12

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) KEEP THE PROMISE III Full Name (Last, First, Middle Initial) LES CHAPMAN Date of Receipt Mailing Address NOT AVAILABLE 2015 10 28 City Zip Code State Transaction ID: SA11AI.652 NOT AVAILABLE IΑ 00000 Amount of Each Receipt this Period FEC ID number of contributing C 300.00 federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) B. LEWIS J COOPER Date of Receipt Mailing Address 743 LOCHMOOR BLVD. 12 17 2015 City State Zip Code Transaction ID: SA11AI.7377 **GROSSE POINT** CA 48236 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation **GREAT LAKES WINE & SPIRITS BOARD MEMBER** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. ROBERT CRAMER Date of Receipt Mailing Address 3100 SW BROOKSIDE DR M M / 12 19 2015 City Zip Code State Transaction ID: SA11AI.7389 IΑ **GRIMES** 50111 Amount of Each Receipt this Period FEC ID number of contributing 3000.00 С federal political committee. Name of Employer Occupation CONSTRUCTION ENGINEER CRAMER AND ASSOC. INC. Receipt For: Aggregate Year-to-Date ▼ Primary General 3000.00 Other (specify) 3550.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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	Statements may not be sold or used by any pers name and address of any political committee to	
NAME OF COMMITTEE (In Full) KEEP THE PROMISE III		
Full Name (Last, First, Middle Initial) ROBERT CURRY		Date of Receipt
Mailing Address 2805 W PITTSBURG ST		11 25 2015
City BROKEN ARROW	State Zip Code OK 74012	Transaction ID : SA11AI.7375 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer RETIRED Receipt For: Primary General	Occupation RETIRED Aggregate Year-to-Date ▼	
Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) MICHAEL DEASY Mailing Address 13316 S SHAWDEE RD SE		Date of Receipt
City	State Zip Code	10 30 2015
HUNTSVILLE	AL 35803	Transaction ID : SA11AI.7366 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) C. PENNY DEMETRIADES		Date of Receipt
Mailing Address P.O. BOX 1790		10 30 2015
City HENDERSON	State Zip Code NC 27536	Transaction ID : SA11AI.7365 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
ETC OF HENDERSON Receipt For:	EXECUTIVE	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)	>	750.00
TOTAL This Period (last page this line numbe	r only)	

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for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) KEEP THE PROMISE III Full Name (Last, First, Middle Initial) PENNY DEMETRIADES Date of Receipt Mailing Address P.O. BOX 1790 01 2015 12 City Zip Code State Transaction ID: SA11AI.7381 NC **HENDERSON** 27536 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer Occupation **ETC OF HENDERSON EXECUTIVE** Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) Full Name (Last, First, Middle Initial) B. ROBERT DIETRICH Date of Receipt Mailing Address 1312 BURBEACK AVE. 10 25 2015 City State Zip Code Transaction ID: SA11AI.6486 **RICHMOND** CA 94801 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Name of Employer Occupation **RETIRED RETIRED** Receipt For: Aggregate Year-to-Date ▼ Primary General 215.00 Other (specify) Full Name (Last, First, Middle Initial) c. ROBERT DIETRICH Date of Receipt Mailing Address 1312 BURBEACK AVE. M M / 26 10 2015 City State Zip Code Transaction ID: SA11AI.5683 CA **RICHMOND** 94801 Amount of Each Receipt this Period FEC ID number of contributing 25.00 С federal political committee. Name of Employer Occupation **RETIRED** RETIRED Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) 555.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

FOR LINE NUMBER: PAGE 13 OF 93 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) KEEP THE PROMISE III Full Name (Last, First, Middle Initial) ROBERT DIETRICH Date of Receipt Mailing Address 1312 BURBEACK AVE. 2015 10 27 City Zip Code State Transaction ID: SA11AI.5701 CA **RICHMOND** 94801 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Occupation RETIRED RETIRED Receipt For: Aggregate Year-to-Date ▼ Primary General 265.00 Other (specify) Full Name (Last, First, Middle Initial) B. ROBERT DIETRICH Date of Receipt Mailing Address 1312 BURBEACK AVE. 10 28 2015 City State Zip Code Transaction ID: SA11AI.5745 **RICHMOND** CA 94801 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Name of Employer Occupation **RETIRED RETIRED** Receipt For: Aggregate Year-to-Date ▼ Primary General 290.00 Other (specify) Full Name (Last, First, Middle Initial) c. ROBERT DIETRICH Date of Receipt Mailing Address 1312 BURBEACK AVE. M M / 04 11 2015 City State Zip Code Transaction ID: SA11AI.6487 CA **RICHMOND** 94801 Amount of Each Receipt this Period FEC ID number of contributing 30.00 С federal political committee. Name of Employer Occupation **RETIRED** RETIRED Receipt For: Aggregate Year-to-Date ▼ Primary General 320.00 Other (specify) 80.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

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for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) KEEP THE PROMISE III Full Name (Last, First, Middle Initial) ROBERT DIETRICH Date of Receipt Mailing Address 1312 BURBEACK AVE. 09 2015 11 City Zip Code State Transaction ID: SA11AI.5859 CA **RICHMOND** 94801 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Occupation RETIRED RETIRED Receipt For: Aggregate Year-to-Date ▼ Primary General 345.00 Other (specify) Full Name (Last, First, Middle Initial) B. ROBERT DIETRICH Date of Receipt Mailing Address 1312 BURBEACK AVE. 11 27 2015 City State Zip Code Transaction ID: SA11AI.6169 **RICHMOND** CA 94801 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Name of Employer Occupation **RETIRED RETIRED** Receipt For: Aggregate Year-to-Date ▼ Primary General 370.00 Other (specify) Full Name (Last, First, Middle Initial) c. ROBERT DIETRICH Date of Receipt Mailing Address 1312 BURBEACK AVE. M M / 12 10 2015 City State Zip Code Transaction ID: SA11AI.6261 CA **RICHMOND** 94801 Amount of Each Receipt this Period FEC ID number of contributing 25.00 С federal political committee. Name of Employer Occupation **RETIRED** RETIRED Receipt For: Aggregate Year-to-Date ▼ Primary General 395.00 Other (specify) 75.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) KEEP THE PROMISE III Full Name (Last, First, Middle Initial) PRESTON EDWARDS Date of Receipt Mailing Address 4514 WAGON RUN 2015 10 29 City Zip Code State Transaction ID: SA11AI.7364 SC MURRELLS INLET 29576 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer Occupation RETIRED RETIRED Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** DIANA GALLAGHER Date of Receipt Mailing Address 32 ASBURY RD 12 03 2015 City State Zip Code Transaction ID: SA11AI.7376 **HACKETTSTOWN** NJ 07840 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation **GALLAGHERS PLMG** OFFICE MGR Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. CARL GUSTKE Date of Receipt Mailing Address 233 STATON ROAD M M 09 01 2015 City State Zip Code Transaction ID: SA11AI.7351 AR CABOT 72023 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation **PILOT** FEDERAL EXPRESS Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 750.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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FOR LINE NUMBER: PAGE 16 OF (check only one) X 11a 11b 11c

93 Use separate schedule(s) for each category of the 12 Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) KEEP THE PROMISE III Full Name (Last, First, Middle Initial) CARL GUSTKE Date of Receipt Mailing Address 233 STATON ROAD 2015 11 02 City Zip Code State Transaction ID: SA11AI.7367 AR CABOT 72023 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer Occupation FEDERAL EXPRESS **PILOT** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** JAN HARDING Date of Receipt Mailing Address 4703 MENLO PARK DR. 09 22 2015 City State Zip Code Transaction ID: SA11AI.7355 SUGAR LAND TX 77479 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation INFORMATION REQUESTED INFORMATION REQUESTED Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. CLINT HARRISON Date of Receipt Mailing Address 8550 ORIENT RD. M M / 09 25 2015 City Zip Code State Transaction ID: SA11AI.7357 TX SAN ANGELO 76905 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation HARRISON ROOFING CO CONTRACTOR Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 750.00 SUBTOTAL of Receipts This Page (optional).....

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TOTAL This Period (last page this line number only).....

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for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) KEEP THE PROMISE III Full Name (Last, First, Middle Initial) ANGIE HAWKS Date of Receipt Mailing Address 2260 OLD RICHARDSON HWY. 2015 10 18 City Zip Code State Transaction ID: SA11AI.7361 ΑK NORTH POLE 99705 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer Occupation HAWKS GREENHOUSE MANAGER Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** LISA HOGENSON Date of Receipt Mailing Address 1951 TYROL DR. 09 07 2015 City State Zip Code Transaction ID: SA11AI.7353 ST. CLOUD MN 56301 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation NONE **HOMEMAKER** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. LOUIS HUDSON Date of Receipt Mailing Address P.O. BOX 914 M M / 11 11 2015 City Zip Code State Transaction ID: SA11AI.7371 TX **NEW WAVERLY** 77358 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation HUDCO **OWNER** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 750.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 - 9

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	Statements may not be sold or used by any persone name and address of any political committee to	
NAME OF COMMITTEE (In Full) KEEP THE PROMISE III		
Full Name (Last, First, Middle Initial) THOMAS JENKINS Mailing Address 910 W HURON ST 403		Date of Receipt 1.1 05 2015
City CHICAGO	State Zip Code IL 60642	Transaction ID : SA11AI.7368 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer HUNTINGTON INSURANCE INC. Receipt For: Primary General Other (specify) ▼	Occupation SR. VICE PRESIDENT TECHINAL RISK Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) THOMAS A CORCORAN JR Mailing Address PO BOX 1373		Date of Receipt
City GRANTS	State Zip Code NM 87020	09 02 2015 Transaction ID : SA11AI.7352 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer RETIRED Receipt For:	Occupation RETIRED Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	, 250.00	
Full Name (Last, First, Middle Initial) EUGENE LEDERER Mailing Address 1168 S BARRINGTON AVE		Date of Receipt 08 25 2015
City LOS ANGELES	State Zip Code CA 90049	Transaction ID : SA11AI.7390 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	7900.00
Name of Employer SELF EMPLOYED	Occupation INVENTOR	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 7900.00	
SUBTOTAL of Receipts This Page (optional)	>	8400.00
TOTAL This Period (last page this line numbe	r only)	

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for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) KEEP THE PROMISE III Full Name (Last, First, Middle Initial) MONICA LUDWIG Date of Receipt Mailing Address 5405 41ST STREET N.W. 2015 10 22 City Zip Code State Transaction ID: SA11AI.7362 DC WASHINGTON 20015 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation ST. PATRICKS SOCIAL CONCERNS Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** EMILY MARX Date of Receipt Mailing Address 2075 OAKLAND BEND 11 22 2015 City State Zip Code Transaction ID: SA11AI.7374 SAN ANTONIO TX 78258 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation RHEUMATOLOGY ASSOCIATES **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. JOHN MARZANO Date of Receipt Mailing Address NOT AVAILABLE M M / 80 10 2015 City State Zip Code Transaction ID: SA11AI.293 IA **NOT AVAILABLE** 00000 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee. Name of Employer Occupation INFORMATION REQUESTED INFORMATION REQUESTED Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 600.00 SUBTOTAL of Receipts This Page (optional).....

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TOTAL This Period (last page this line number only).....

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	and Statements may not be sold or used by any per ig the name and address of any political committee	
NAME OF COMMITTEE (In Full) KEEP THE PROMISE III		
Full Name (Last, First, Middle Initial) JOHN MARZANO Mailing Address NOT AVAILABLE City NOT AVAILABLE FEC ID number of contributing federal political committee. Name of Employer INFORMATION REQUESTED Receipt For: Primary General Other (specify)	State Zip Code IA 00000 C Occupation INFORMATION REQUESTED Aggregate Year-to-Date ▼ 400.00	Date of Receipt 10 08 2015 Transaction ID: SA11AI.294 Amount of Each Receipt this Period 100.00
Full Name (Last, First, Middle Initial) JOHN MARZANO Mailing Address NOT AVAILABLE City NOT AVAILABLE FEC ID number of contributing federal political committee. Name of Employer INFORMATION REQUESTED Receipt For: Primary General Other (specify) Other (specify)	State Zip Code IA 00000 C Occupation INFORMATION REQUESTED Aggregate Year-to-Date ▼ 500.00	Date of Receipt 10 08 2015 Transaction ID: SA11AI.295 Amount of Each Receipt this Period 100.00
Full Name (Last, First, Middle Initial) SEBASTIAN MATHEW Mailing Address 5256 W HARVARD TER City SKOKIE FEC ID number of contributing federal political committee. Name of Employer ISAC Receipt For: Primary General Other (specify)	RACE State Zip Code IL 60077 C Occupation ACCOUNTS ASSOCIATE Aggregate Year-to-Date ▼ 250.00	Date of Receipt 09 07 2015 Transaction ID: SA11AI.7354 Amount of Each Receipt this Period 250.00
SUBTOTAL of Receipts This Page (optional	al)	450.00
TOTAL This Period (last page this line nur	nher only)	

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or for commercial purposes, other than using	d Statements may not be sold or used by any pers the name and address of any political committee to	
NAME OF COMMITTEE (In Full) KEEP THE PROMISE III		
Full Name (Last, First, Middle Initial) FORREST MCDONALD Mailing Address 608 EAST PIATT LANE		Date of Receipt
City OLATHE FEC ID number of contributing federal political committee. Name of Employer MESSPLAY MACHINERY CO. Receipt For: Primary General Other (specify)	State Zip Code KS 66061 C Occupation SALES ENG. Aggregate Year-to-Date ▼ 1000.00	Transaction ID : SA11AI.7387 Amount of Each Receipt this Period 1000.00
Full Name (Last, First, Middle Initial) JOAN MILLER Mailing Address 1374. 13.3. RD. City LOMA FEC ID number of contributing federal political committee. Name of Employer SELF EMPLOYED Receipt For:	State Zip Code CO 81524 C Occupation TEACHER	Date of Receipt 10 25 2015 Transaction ID : SA11AI.7386 Amount of Each Receipt this Period
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) JIM MOORE Mailing Address 5413 DEER HILL COURT City RALEIGH FEC ID number of contributing federal political committee.	Aggregate Year-to-Date ▼ 1000.00 State Zip Code NC 27613	Date of Receipt 11 17 2015 Transaction ID: SA11AI.7379 Amount of Each Receipt this Period
Name of Employer RETIRED Receipt For: Primary General Other (specify) ▼	Occupation RETIRED Aggregate Year-to-Date ▼ 500.00	2500.00
	<u> </u>	2,00.00
TOTAL This Period (last page this line numb	er only)	

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14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) KEEP THE PROMISE III Full Name (Last, First, Middle Initial) DIANE MUNRO Date of Receipt Mailing Address 6105 MILAM DR SW 2015 12 16 City Zip Code State Transaction ID: SA11AI.7348 GΑ **MABLETON** 30126 Amount of Each Receipt this Period FEC ID number of contributing C 200.00 federal political committee. Name of Employer Occupation RETIRED RETIRED Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) Full Name (Last, First, Middle Initial) **B. PHILIP NAVRATIL** Date of Receipt Mailing Address 2035 MILFORD ST 08 25 2015 City State Zip Code Transaction ID: SA11AI.7350 HOUSTON TX 77098 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation **FAIRFIELDNODAL ENGINEER** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. ELIZABETH PAYNE Date of Receipt Mailing Address 1878 HURON DR. M M / 11 12 2015 City Zip Code State Transaction ID: SA11AI.7388 TX **ROCKWALL** 75087 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. Name of Employer Occupation **ACCOUNTANT** DALLAS ISD Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 1450.00 SUBTOTAL of Receipts This Page (optional).....

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for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) KEEP THE PROMISE III Full Name (Last, First, Middle Initial) ROGER PECHULS Date of Receipt Mailing Address 1204 S BAYFRONT 2015 12 08 City Zip Code State Transaction ID: SA11AI.7382 CA **BALBOA ISLAND** 92662 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer Occupation RETIRED RETIRED Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** DIANNE PEDEN Date of Receipt Mailing Address NOT AVAILABLE 09 14 2015 City State Zip Code Transaction ID: SA11AI.1616 **NOT AVAILABLE** IΑ 00000 Amount of Each Receipt this Period FEC ID number of contributing C 300.00 federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) c. HAROLD PREECE Date of Receipt Mailing Address 455 ALEXANDER LOOP M M / 12 16 2015 City Zip Code State Transaction ID: SA11AI.7347 OR **EUGENE** 97401 Amount of Each Receipt this Period FEC ID number of contributing 200.00 С federal political committee. Name of Employer Occupation **RETIRED** RETIRED Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 1000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 - 9

		PAGE 24 OF 93
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Detailed Summary Page	X 11a 11b	11c 12

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NAME OF COMMITTEE (In Full) KEEP THE PROMISE III		
Full Name (Last, First, Middle Initial) SOL PRIZANT Mailing Address 3201 NE 183RD STREE	T APT 2403	Date of Receipt
City AVENTURA FEC ID number of contributing federal political committee.	State Zip Code FL 33160	Transaction ID: SA11AI.7380 Amount of Each Receipt this Period 500.00
Name of Employer RETIRED Receipt For: Primary General Other (specify) ▼	Occupation RETIRED Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) 3. SOL PRIZANT Mailing Address 3201 NE 183RD STREE	T APT 2403	Date of Receipt 12 14 2015
City AVENTURA FEC ID number of contributing federal political committee.	State Zip Code FL 33160	Transaction ID : SA11AI.7383 Amount of Each Receipt this Period 500.00
Name of Employer RETIRED Receipt For: Primary General Other (specify) ▼	Occupation RETIRED Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) DAVID REYNOLDS Mailing Address 5305 FULTON IND BLV	D SW STE B	Date of Receipt
City ATLANTA FEC ID number of contributing federal political committee. Name of Employer REYNOLDS PUBLISHING INC Receipt For: Primary General Other (specify)	State Zip Code GA 30336 C Occupation SMALL BUSINESS OWNER Aggregate Year-to-Date ▼ 250.00	Transaction ID : SA11AI.7360 Amount of Each Receipt this Period 250.00
		1250.00
SUBTOTAL of Receipts This Page (option	al)	1255.00
TOTAL This Period (last page this line nur	mber only)	

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or for commercial purposes, other than using the	Statements may not be sold or used by any persone name and address of any political committee to	
NAME OF COMMITTEE (In Full) KEEP THE PROMISE III		
Full Name (Last, First, Middle Initial) LANA RYAN Mailing Address 10218 DUTCH IRIS DR. City	State Zip Code	Date of Receipt 11 18 2015 Transaction ID: SA11AI.7372
BAKERSFIELD FEC ID number of contributing federal political committee. Name of Employer	CA 93311 C Occupation	Amount of Each Receipt this Period 250.00
RETIRED Receipt For: Primary General Other (specify)	RETIRED Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) MICHAEL SHINNERS Mailing Address 8515 S PARKLAND DRIVE	Chata	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City FRANKLIN FEC ID number of contributing federal political committee.	State Zip Code WI 53132	Transaction ID : SA11AI.7358 Amount of Each Receipt this Period 250.00
Name of Employer MICHAEL K SHINNERS Receipt For: Primary General Other (specify) ▼	Occupation DDS Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) DAVID SIMS Mailing Address NOT AVAILABLE		Date of Receipt 10 22 2015
City NOT AVAILABLE FEC ID number of contributing federal political committee. Name of Employer Receipt For:	State Zip Code IA 00000 C Occupation	Transaction ID : SA11AI.533 Amount of Each Receipt this Period 400.00
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	
SUBTOTAL of Receipts This Page (optional)	>	900.00
TOTAL This Period (last page this line number	· only)	

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NAME OF COMMITTEE (In Full) KEEP THE PROMISE III		
Full Name (Last, First, Middle Initial) GREG SOWARDS Mailing Address 2916 MAESE LN.		Date of Receipt
City LAS CRUCES	State Zip Code NM 88007	Transaction ID : SA11AI.7373 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer RETIRED Receipt For:	Occupation RETIRED Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	300.00	
Full Name (Last, First, Middle Initial) CAROL SWARTZ Mailing Address 7007 TUCKAWAY ST.	1	Date of Receipt
City	State Zip Code	12 17 2015 Transaction ID : SA11AI.7378
SAN DIEGO	CA 92119	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) . MARTHA WOLF		Date of Receipt
Mailing Address 8710 HEADLEY DR		12 07 2015
City STERLING HEIGHTS	State Zip Code MI 48314	Transaction ID : SA11AI.7297 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	
RETIRED Receipt For:	RETIRED	
Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional)	<u> </u>	600.00
TOTAL This Period (last page this line number	r only)	

FOR LINE NUMBER: PAGE 27 OF (check only one) X 11a 11b 12 11c

93 Use separate schedule(s) for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) KEEP THE PROMISE III Full Name (Last, First, Middle Initial) MARTHA WOLF Date of Receipt Mailing Address 8710 HEADLEY DR 2015 12 19 City Zip Code State Transaction ID: SA11AI.7318 STERLING HEIGHTS MI 48314 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Name of Employer Occupation RETIRED RETIRED Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) Full Name (Last, First, Middle Initial) В. Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 100.00 SUBTOTAL of Receipts This Page (optional).....

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TOTAL This Period (last page this line number only).....

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	Mailing Address PO BOX 92225				м = м	/ D	28 /	2015							
	City	State	Zip Code		Trans	action I	D : SA12								
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	FEC ID number of contributing federal political committee.	C co	0575415			,		2000	00.00]					
	Name of Employer	Occupation													
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	Other (specify) ▼		200000.00												
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_	Full Name (Last, First, Middle Initial)				- · ·										
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	FEC ID number of contributing				-					1					
	federal political committee.	С		l I		7			/E)	J					
	Name of Employer	Occupation													
	Receipt For:	Aggregate	Year-to-Date ▼												
	Primary General	33 - 3													
	Other (specify) ▼		4 4												
C.	Full Name (Last, First, Middle Initial)				Date of	Receip	t								
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	federal political committee.	C		l l		7	, ,		-	J					
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	Primary General	33 30													
	Other (specify) ▼		, , , , , , , , ,												
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SCHEDULE B (FEC Form 3X)		FOR LINE	PAGE 29 OF 93	
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only one)		
	Detailed Summary Page	X 21b 27	22 23 28b	24 25 26 28c 29 30b
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or for commercial purposes, other than using the na				
NAME OF COMMITTEE (In Full)				
$ \; angle$ KEEP THE PROMISE III				
Full Name (Last, First, Middle Initial)				
A. AMERICAN AIRLINES			Date of Disbursemen	nt
Market Address Bo Bostones			M M / D D	/ Y Y Y Y Y
Mailing Address PO BOX 619616			08 14	2015
City	State Zip Code		Transaction ID - Cl	P21R 10
DALLAS	TX 75261		Transaction ID : SI	DZ 1 D. 19
Purpose of Disbursement PAC TRAVEL EXPENSE		001	Amount of Each Dis	bursement this Period
Candidate Name		Category/		
		Type		55.84
Office Sought: House Disburse Senate	ement For: Primary General			
President	Primary General Other (specify) ▼			
State: District:				
Full Name (Last, First, Middle Initial)				
B. AMERICAN AIRLINES			Date of Disbursemen	
Mailing Address PO BOX 619616			08 14	2015
City	State Zip Code TX 75261		Transaction ID : S	B21B.18
DALLAS Purpose of Disbursement	TX 75261			
PÁC TRAVEL EXPENSE		001	Amount of Each Dis	bursement this Period
Candidate Name		Category/		654.20
Office Sought: House Disburse	ement For:	Туре		004.20
Senate Dispurse	Primary General			
President	Other (specify) ▼			
State: District:	-			
Full Name (Last, First, Middle Initial)			Data of Diahuraan	nt.
C. AMERICAN AIRLINES			Date of Disbursemen	1t
Mailing Address PO BOX 619616			09 02	2015
0.1	01-1-			
City DALLAS	State Zip Code TX 75261		Transaction ID : S	B21B.27
Purpose of Disbursement	10201			
PAC TRAVEL EXPENSE		001	Amount of Each Dis	bursement this Period
Candidate Name		Category/		57.88
Office Sought: House Disburse	ement For:	Туре		7
Senate	Primary General			
President	Other (specify) ▼			
State: District:				
SUBTOTAL of Disbursements This Page (optional)				767.92
SOBTOTAL OF DISDUISEMENTS THIS Page (optional)		·····		7
TOTAL This Period (last page this line number onl	y)			,

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SCHEDULE B (FEC Form 3X)	11	FOR LINE NUMBER: PAGE 30			
ITEMIZED DISBURSEMENTS	Use separate schedule(for each category of the	(oneon only			
	Detailed Summary Page	21b	22 23 28b	24 25 26 28c 29 30b	
Any information copied from such Reports and Stater	ments may not be sold or				
or for commercial purposes, other than using the nar					
NAME OF COMMITTEE (In Full)					
KEEP THE PROMISE III					
Full Name (Last, First, Middle Initial)					
A. AMERICAN AIRLINES			Date of Disburseme		
Mailing Address PO BOX 619616			09 02	2015	
•	State Zip Code		Transaction ID : S	SP21P 26	
DALLAS Purpose of Disbursement	TX 75261		Transaction ib . S	3B21B.20	
PAC TRAVEL EXPENSE		001	Amount of Each Dis	sbursement this Period	
Candidate Name		Category/		332.20	
Office Sought: House Disburse	ment For:	Type		002.20	
Senate Disburser	Primary General				
President	Other (specify) ▼				
State: District:					
Full Name (Last, First, Middle Initial) B. AMERICAN EXPRESS			Date of Disburseme	ant and	
S. AMERICAN EXPRESS			M M / D D	/	
Mailing Address 4315 S 2700 W			12 04	2015	
City SALT LAKE CITY	State Zip Code UT 84184		Transaction ID : \$	SB21B.151	
Purpose of Disbursement	01 04104				
TRANSACTION FEES		001	Amount of Each Dis	sbursement this Period	
Candidate Name		Category/ Type		42.53	
Office Sought: House Disburser	ment For:	Туре			
Senate	Primary General				
President State: District:	Other (specify)				
Full Name (Last, First, Middle Initial)					
C. AMERICAN EXPRESS			Date of Disburseme	ent	
Mailian Address (277.2.2.2.2			M M / D D	/ Y Y Y Y Y	
Mailing Address 4315 S 2700 W			12 04	2015	
,	State Zip Code		Transaction ID : \$	SB21B.150	
SALT LAKE CITY Purpose of Disbursement	UT 84184				
TRANSACTION FEES		001	Amount of Each Dis	sbursement this Period	
Candidate Name		Category/	The same of Edon Div		
Office Sought: House Disburse	ment For:	Type		376.36	
Senate Dispurse	ment For: Primary General				
President	Other (specify) ▼				
State: District:					
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SUBTOTAL of Disbursements This Page (optional)		<u> </u>		7	
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SCHEDULE B (FEC Form 3X)		FOR LINE I	E 31 OF 93	
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)	
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Full Name (Last, First, Middle Initial)		<u> </u>		
A. AMERICAN EXPRESS			Date of Disbursement	
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Mailing Address 4315 S 2700 W			12 29	2015
City	State Zip Code			
SALT LAKE CITY	UT 84184		Transaction ID : SB21B.15	52
Purpose of Disbursement TRANSACTION FEES		004	A	and the second
Candidate Name		001	Amount of Each Disburseme	ent this Period
Candidate Harris		Category/ Type		100.00
Office Sought: House Disbursen	nent For:	71		
	Primary General			
President State: District:	Other (specify) ▼			
Full Name (Last, First, Middle Initial)				
B. AMERICAN EXPRESS			Date of Disbursement	
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Mailing Address 4315 S 2700 W			12 31	2015
	State Zip Code UT 84184		Transaction ID : SB21B.1	53
SALT LAKE CITY Purpose of Disbursement	UT 84184			
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Candidate Name		Category/		100.00
Office Sought: House Disbursen	pont For:	Туре	7	100.00
	nent For: Primary General			
	Other (specify)			
State: District:				
Full Name (Last, First, Middle Initial)			Data of Diale	
C. APPLE STORE			Date of Disbursement	
Mailing Address 6121 W PARK BLVD.			08 20 / Y	2015
,	State Zip Code TX 75093		Transaction ID : SB21B.2	1
Purpose of Disbursement	75095			
PAC COMPUTER EXPENSE		001	Amount of Each Disburseme	ent this Period
Candidate Name		Category/		395.93
Office Sought: House Disbursen	nent For:	Туре		
	Primary General			
	Other (specify) ▼			
State: District:				
				595.93
SUBTOTAL of Disbursements This Page (optional)				555.55

SCHEDULE B (FEC Form 3X)	Lice congrete ashedule(s)		DR LINE NUMBER: PAGE 32		
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only 21b	one) 22 23 24 [25 26	
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NAME OF COMMITTEE (In Full)	no and address of any politica	. John Milee 10	CONOR CONTRIBUTIONS HOTH SUCH	Committee.	
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Full Name (Last, First, Middle Initial) A. APPLE STORE			Date of Disbursement		
AFFEE STORE				Y Y Y	
Mailing Address 6121 W PARK BLVD.			09 11	2015	
City	State Zip Code		Transaction ID : SB21B.37	,	
PLANO Purpose of Disbursement	TX 75093		Transaction ib . SB21B.37		
PAC COMPUTER EXPENSE		001	Amount of Each Disburseme	ent this Period	
Candidate Name		Category/		27.01	
Office Sought: House Disburse	ment For:	Туре	7	27.01	
Senate	Primary General				
President State: District:	Other (specify) ▼				
Full Name (Last, First, Middle Initial)					
B. APPLE STORE			Date of Disbursement		
Mailing Address 0404 W DADIA DIVID			2015		
Mailing Address 6121 W PARK BLVD.			09 11	2015	
City PLANO	State Zip Code TX 75093		Transaction ID : SB21B.36	6	
Purpose of Disbursement	73093				
PAC COMPUTER EXPENSE Candidate Name		001	Amount of Each Disburseme	ent this Period	
Candidate Name		Category/ Type		3098.92	
Office Sought: House Disburse	ment For:	.,,,,,	,		
Senate President	Primary General Other (specify) ▼				
State: District:	Other (specify)				
Full Name (Last, First, Middle Initial)					
C. AVALON HOTELS			Date of Disbursement		
Mailing Address 9400 W OLYMPIC BLVD			09 11	2015	
City	State Zip Code				
BEVERLY HILLS	CA 90212		Transaction ID : SB21B.38	3	
Purpose of Disbursement PAC TRAVEL EXPENSE		001	Amount of Each Disburseme	and this Devied	
Candidate Name		Category/ Type	Amount of Each Dispurseme	461.35	
	ment For:		7		
Senate President	Primary General Other (specify) ▼				
State: District:	Salor (opcony)				
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SUBTOTAL of Disbursements This Page (optional)		·····•		3587.28	
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	LE B (FEC Form 3X)	llea canarata achadula(a)		FOR LINE NUMBER: PAGE 33			
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	(Last, First, Middle Initial)			B			
A. BANK	OF AMERICA			Date of Disk	oursement		
Mailing Ad	ddress 901 GUADALUPE STREET			10	13 2015		
City AUSTIN		State Zip Code TX 78701		Transactio	on ID : SB21B.48		
PÁC BAN	-		001	Amount of E	Each Disbursement this Period		
Candidate			Category/ Type		25.00		
Office Sou	Senate President	ment For: Primary General Other (specify)					
State:	District:						
Full Name (Last, First, Middle Initial) B. BANK OF AMERICA					oursement		
Mailing Ad	ddress 901 GUADALUPE STREET			10	21 2015		
City AUSTIN		State Zip Code TX 78701		Transactio	on ID : SB21B.50		
PÁC BAN			001	Amount of E	Each Disbursement this Period		
Candidate			Category/ Type		25.00		
Office Sou	ght: House Disburse Senate President District:	ment For: Primary General Other (specify) ▼					
	e (Last, First, Middle Initial) OF AMERICA			Date of Disk			
Mailing Ad	ddress 901 GUADALUPE STREET			11 /	03 2015		
City AUSTIN		State Zip Code TX 78701		Transactio	on ID : SB21B.54		
Purpose o	of Disbursement		004				
Candidate			001 Category/ Type	Amount of E	Each Disbursement this Period 25.00		
Office Sou	ught: House Disburse Senate President District:	ment For: Primary General Other (specify) ▼	7,1-2				
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S	SCHEDULE B (FEC Form 3X) FOR LINE NUI			NUMBER: PAGE 34 OF 93												
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Α.	BANK OF AMERICA							Date o	f Di	sburse	eme	ent				
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	Mailing Address 901 GUADALUPE STREET							11		1	0	Ш	_ 2	015		
	City	State	Zip Code													
	AUSTIN	TX	78701					Trans	sact	ion ID	: 8	SB21E	3.58			
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	Office Sought: House Disburser Senate		General													
	President	Primary Other (spec														
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	Full Name (Last, First, Middle Initial)															
В.	BANK OF AMERICA							Date o	f Di	sburse	eme	ent				
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	City	State	Zip Code													
	AUSTIN	TX	78701					Trans	sact	ion ID	: 9	SB21I	3.60			
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	Senate Dispulser	Primary	General													
	President	Other (spec														
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	Full Name (Last, First, Middle Initial)															
C.	BANK OF AMERICA							Date o	f Di	sburse	eme	ent				
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	Mailing Address 901 GUADALUPE STREET							11	4	3	80			015	_	1
	City	State	Zip Code					-		15		2004				
	AUSTIN	TX	78701					irans	sact	ion ID):3	5B211	5.155)		
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	Office Sought: House Disburser	nent For:			, 00				-	7		7				
	Senate	Primary	General													
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SCHEDULE B (FEC Form 3X)	Lice congrete cohodule/s)	FOR LINE		93
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	v one) □ 22 □ 23 □ 24 □ 25 □	□ 26	
	Detailed Summary Page	X 21b 27	28a 28b 28c 29	30
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Full Name (Last, First, Middle Initial)			Date of Dishamanant	
A. BANK OF AMERICA			Date of Disbursement	_
Mailing Address 901 GUADALUPE STREET			12 10 2015	
City AUSTIN	State Zip Code TX 78701		Transaction ID : SB21B.156	
Purpose of Disbursement BANK FEES		001	Amount of Each Disbursement this Per	riod
Candidate Name		Category/ Type	30.0	0
Senate President	ement For: Primary General Other (specify)	Турс		
State: District:				
Full Name (Last, First, Middle Initial) B. BANKCARD			Date of Disbursement	
Mailing Address PO BOX 2557			09 03 2015	
City OMAHA	State Zip Code NE 68103		Transaction ID : SB21B.28	
Purpose of Disbursement PAC TRAVEL EXPENSE		001	Amount of Each Disbursement this Pe	riod
Candidate Name		Category/ Type	774.1	0
Office Sought: House Disburs Senate President State: District:	ement For: Primary General Other (specify) ▼			
Full Name (Last, First, Middle Initial) C. BANKCARD			Date of Disbursement	
Mailing Address PO BOX 2557			10 05 7 2015]
City OMAHA	State Zip Code NE 68103		Transaction ID : SB21B.44	
Purpose of Disbursement PAC TRANSACTION FEES		001		
Candidate Name		Category/ Type	Amount of Each Disbursement this Per 1381.62	
Office Sought: House Disburs	ement For: Primary General Other (specify)	7,50		
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SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number on			2185.72	2

ITEMIZED DISBURSEMENTS	Use separate schedule(s)		NUMBER: PAGE 36 OF 93
	for each category of the Detailed Summary Page	(check only	22 23 24 25 26
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NAME OF COMMITTEE (In Full)			
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Full Name (Last, First, Middle Initial)			Date of Disbursement
A. BANKCARD			M M / D D / Y Y Y Y
Mailing Address PO BOX 2557			11 03 2015
City	State Zip Code		Transaction ID : SB21B.53
OMAHA Purpose of Disbursement	NE 68103		Transaction is 1 05215.00
PAC TRANSACTION FEES		001	Amount of Each Disbursement this Period
Candidate Name		Category/	1719.29
Office Sought: House Disburse	ment For:	Туре	
Senate	Primary General		
State: District:	Other (specify) ▼		
Full Name (Last, First, Middle Initial)			
B. BANKCARD			Date of Disbursement
Mailing Address PO BOX 2557		12 03 2015	
City OMAHA	State Zip Code NE 68103		Transaction ID : SB21B.157
Purpose of Disbursement TRANSACTION FEES		204	Assessment of Fresh Disharm and Albin Deviced
Candidate Name		001	Amount of Each Disbursement this Period
		Category/ Type	1244.82
Office Sought: House Disburse Senate	ment For: Primary General		
President	Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) C. BERKE FARAH LLP			Date of Disbursement
- BERKE FARAH LLF			M M / D D / Y Y Y Y
Mailing Address 1200 NEW HAMPSHIRE AVE ST	E 800		07 14 2015
City	State Zip Code		Transaction ID : SB21B.13
WASHINGTON Purpose of Disbursement	DC 20036		
PAC LEGAL FEES		001	Amount of Each Disbursement this Period
Candidate Name		Category/ Type	3125.00
Office Sought: House Disburse	ment For:	Турс	
	Primary General		
Senate		I	
	Other (specify)		
Senate President	Other (specify)		
Senate President		······ •	6089.11

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		Detailed Summary Page		7 28a	28b	28c	29	30b
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A.	BERKE FARAH LLP			Date C	of Disburser		Y	Y
	Mailing Address 1200 NEW HAMPSHIRE AVE STE			08	13		2015	
	WASHINGTON	State Zip Code DC 20036		Trans	saction ID :	SB21B.17		
	Purpose of Disbursement PAC LEGAL FEES		001	Amour	nt of Each [Disburseme	nt this I	Period
	Candidate Name		Category/	-			2500	0.00
	Office Sought: House Disburser	ment For:	Type	_	-			
	Senate	Primary General						
	President State: District:	Other (specify) ▼						
	Full Name (Last, First, Middle Initial)							
	BERKE FARAH LLP			Date o	of Disburser	ment		
	Mailing Address 1200 NEW HAMPSHIRE AVE STI	= 800		08	26		y y y 2 2015	Y
	City S WASHINGTON	State Zip Code DC 20036		Tran	saction ID	: SB21B.24		
	Purpose of Disbursement PAC LEGAL FEES		204	┪.		D: 1		
	Candidate Name		001	-	it of Each L	Disburseme	nt this I	Period
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	Office Sought: House Disburser Senate	nent For: Primary General						
	President	Other (specify)						
	State: District:							
_	Full Name (Last, First, Middle Initial) BERKE FARAH LLP			Date o	of Disburser	ment		
•	DERINE I ARAIT LEI			M			ΥΥΥ	Υ
	Mailing Address 1200 NEW HAMPSHIRE AVE STE	800		09	25		2015	
	•	State Zip Code		Tran	saction ID :	: SB21B.41		
	WASHINGTON Purpose of Disbursement	DC 20036						
	PAC LEGAL FEES			Amour	nt of Each [Disburseme	nt this I	Period
	Candidate Name		Category/ Type				4000	0.00
	Office Sought: House Disburser	ment For:	Турс	_	7			
	Senate	Primary General						
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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	-
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NAME OF COMMITTEE (In Full) KEEP THE PROMISE III			
Full Name (Last, First, Middle Initial)			Date of Disbursement
A. BERKE FARAH LLP			Man / Dad / Yayayay
Mailing Address 1200 NEW HAMPSHIRE AVE ST	≣ 800		10 26 2015
City WASHINGTON	State Zip Code DC 20036		Transaction ID : SB21B.52
Purpose of Disbursement PAC LEGAL FEES		001	Amount of Each Disbursement this Period
Candidate Name		Category/	4000.00
Office Sought: House Disburse	ment For: Primary General Other (specify)	Туре	
Full Name (Last, First, Middle Initial)			
B. BERKE FARAH LLP			Date of Disbursement
Mailing Address 1200 NEW HAMPSHIRE AVE ST	E 800		11 25 2015
City WASHINGTON	State Zip Code DC 20036		Transaction ID : SB21B.158
Purpose of Disbursement LEGAL FEES		001	Amount of Each Disbursement this Period
Candidate Name		Category/ Type	4000.00
Office Sought: House Senate President State: Disburse	ment For: Primary General Other (specify) ▼		
Full Name (Last, First, Middle Initial) C. BERKE FARAH LLP			Date of Disbursement
Mailing Address 1200 NEW HAMPSHIRE AVE ST	E 800		12 24 2015
City WASHINGTON	State Zip Code DC 20036		Transaction ID : SB21B.159
Purpose of Disbursement LEGAL FEES Candidate Name		001 Category/ Type	Amount of Each Disbursement this Period 4000.00
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)	туре	
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Α.	BEST BUY				Date	of Disbu	ırsemer		Y	V
	Mailing Address 7601 PENN AVE				10		09		2015	·
	City S RICHFIELD	State MN	Zip Code 55423		Trai	nsaction	ID : SI	B21B.47	7	
	Purpose of Disbursement	IVIIN	55425							
	PAC COMPUTER EXPENSE			001	Amou	ınt of Ea	ch Dist	burseme	ent this	Period
	Candidate Name			Category/ Type					35	3.59
	Office Sought: House Disburser	nent For:		1,400	_					
	Senate	Primary	General							
	State: District:	Other (spe	city) 🔻							
_	Full Name (Last, First, Middle Initial)									
В.	JUSTIN BRADSHAW				Date	of Disbu	ırsemer	nt		
	Molling Address 500 MEST (IEM DD) (5				M		D D	/ Y	7 Y	Y
	Mailing Address 509 WESTVIEW DRIVE				12		29		2015	_
	,	State	Zip Code		Tra	nsaction	ı ID : SI	B21B.17	73	
	ABILENE Purpose of Disbursement	TX	79603		_					
	VIDEO PRODUCTION			001	Amou	int of Ea	ch Dish	ourseme	ent this	Period
	Candidate Name			Category/ Type					25	50.00
	Office Sought: House Disburser	nent For:		туре		,		,		
	Senate	Primary	General							
	President State: District:	Other (spe	cify) 🔻							
_	Full Name (Last, First, Middle Initial)				+					
C.	,	VICES			Date	of Disbu	ırsemer	nt		
	Mailing Address 301 N GRAY ST				12		18	/ Y	2015	Y
	INIAIIIII Address 301 N GRAY ST				12		10		2013	
	,	State	Zip Code		Tra	nsaction	ı ID : SI	B21B.16		
	CALDWELL Purpose of Disbursement	TX	77836		_					
	EVENT COORDINATION			001	Amou	int of Ea	ch Disl	burseme	ent this	Period
	Candidate Name			Category/					147	1.55
	Office Sought: House Disburser	nent For:		Type		- 7		7		
	Senate	Primary	General							
	President	Other (spe	cify) 🔻							
г	State: District:									
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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	
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NAME OF COMMITTEE (In Full) KEEP THE PROMISE III	and address of any political	. Sommer to	Security and the security of t
Full Name (Last, First, Middle Initial)			B (B)
A. DAMON CROW CATERING			Date of Disbursement
Mailing Address 1609 DURANT STREET			12 14 2015
City DALLAS	State Zip Code TX 75216		Transaction ID: SB21B.161
Purpose of Disbursement EVENT CATERING		001	Amount of Each Disbursement this Period
Candidate Name		Category/	9400.00
Office Sought: House Disburse	ment For:	Туре	3400.00
Senate President	Primary General Other (specify)		
State: District:			
B. DAMON CROW CATERING			Date of Disbursement
Mailing Address 1609 DURANT STREET			12 29 2015
City DALLAS Purpose of Disbursement	State Zip Code TX 75216		Transaction ID : SB21B.2293
PAC EVENT CATERING		001	Amount of Each Disbursement this Period
Candidate Name		Category/ Type	6000.00
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify) ▼		
Full Name (Last, First, Middle Initial) C. DAMON CROW CATERING			Date of Disbursement
Mailing Address 1609 DURANT STREET			12 29 2015
City DALLAS	State Zip Code TX 75216		Transaction ID : SB21B.162
Purpose of Disbursement EVENT CATERING Candidate Name		001 Category/ Type	Amount of Each Disbursement this Period 7400.00
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify) ▼	-315	
SUBTOTAL of Disbursements This Page (optional). TOTAL This Period (last page this line number only			22800.00

SCHEDULE B (FEC Form 3X)	Use separate schedule(s	a\	FOR LINE NUMBER: PAGE 41		
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(official offing	one) 22 23 28 28b	24 25 2 28c 29 3	
Any information copied from such Reports and Sta or for commercial purposes, other than using the r					
NAME OF COMMITTEE (In Full) KEEP THE PROMISE III	iame and address of any poli	nicai committee to	Solicit Contributions IfOf	n such confinitee.	
Full Name (Last, First, Middle Initial)			5		
A. FINLEY PRODUCTIONS			Date of Disbursemen	t /	
Mailing Address 5729 LEBANON RD STE 144			12 14	2015	
City FRISCO	State Zip Code TX 75034	_	Transaction ID : SB	321B.164	
Purpose of Disbursement VIDEO PRODUCTION		001	Amount of Each Disb	oursement this Period	
Candidate Name		Category/		3994.45	
Office Sought: House Disbur	sement For:	Type		3394.40	
Senate President	Primary General Other (specify)				
State: District:					
Full Name (Last, First, Middle Initial) B. FINLEY PRODUCTIONS			Date of Disbursemen		
Mailing Address 5729 LEBANON RD STE 144			12 24	2015	
City FRISCO	State Zip Code TX 75034		Transaction ID : SE	321B.165	
Purpose of Disbursement VIDEO PRODUCTION		001	Amount of Each Disb	oursement this Period	
Candidate Name		Category/ Type		6210.32	
Office Sought: House Disbur	sement For: Primary General Other (specify) ▼				
Full Name (Last, First, Middle Initial) C. HOLIDAY INN EXPRESS			Date of Disbursemen		
Mailing Address PO BOX 30321			12 29	2015	
City SALT LAKE CITY	State Zip Code UT 84130		Transaction ID : SE	321B.169	
Purpose of Disbursement TRAVEL EXPENSE		001	Amount of Each Disb	uraamant this Pariod	
Candidate Name		Category/ Type	Amount of Each Disp	169.50	
Office Sought: House Disbur	sement For: Primary General Other (specify) ▼				
SUBTOTAL of Disbursements This Page (optional	l)	>		10374.27	
TOTAL This Period (last page this line number or	nly)				

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	
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NAME OF COMMITTEE (In Full) KEEP THE PROMISE III			
Full Name (Last, First, Middle Initial) - HOLIDAY INN EXPRESS			Date of Disbursement
Mailing Address PO BOX 30321			12 29 2015
City SALT LAKE CITY	State Zip Code UT 84130		Transaction ID : SB21B.168
Purpose of Disbursement TRAVEL EXPENSE		001	Amount of Each Disbursement this Period
Candidate Name		Category/ Type	169.50
Senate President	ement For: Primary General Other (specify)		
State: District: Full Name (Last, First, Middle Initial)			
- HOLIDAY INN EXPRESS			Date of Disbursement
Mailing Address PO BOX 30321			12 29 2015
City SALT LAKE CITY	State Zip Code UT 84130		Transaction ID : SB21B.170
Purpose of Disbursement TRAVEL EXPENSE		001	Amount of Each Disbursement this Period
Candidate Name		Category/ Type	113.00
Office Sought: House Disburs Senate President State: District:	ement For: Primary General Other (specify) ▼		
Full Name (Last, First, Middle Initial) - JASPER'S			Date of Disbursement
Mailing Address 7161 BISHOP'S RD			11 20 2015
City PLANO	State Zip Code TX 75024		Transaction ID : SB21B.172
Purpose of Disbursement MEETING EXPENSE Candidate Name		001 Category/ Type	Amount of Each Disbursement this Period 244.19
Office Sought: House Disburs Senate	ement For: Primary General	.,,,,,	

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S	CHEDULE B (FEC Form 3X)			FC	OR I	LINE	NUMBEF	R:			PAC	GE 43	OF	93
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			Summary Page		×	21b 27	22 28a	-	23 28b	-	24 28c	25 29	-	26 30b
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	for commercial purposes, other than using the name													
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<u></u>	Full Name (Last, First, Middle Initial)													
A.	KATX						Date	of Di	sburse	eme	nt			
	Mailing Address 2040 WEST COMMERCE						M = 1	-	D		/ Y	Y Y	I Y	7
	Mailing Address 2010 WEST COMMERCE						12	-		7		2015		
	•	State	Zip Code				Tran	sact	ion ID		B21B.1	174		
	EASTLAND Purpose of Disbursement	TX	76448				IIaii	Saci	.1011 12	. 3	D2 1 D.	17-4		
	PAC ADVERTISING			0	01		Amou	nt of	Each	Dis	bursen	nent this	s Pe	eriod
	Candidate Name			Cate	eaor	v/		_	-			40	05.0	
	200				/pe	,		-	7	_	7	19	95.0	00
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		Other (spe												
	State: District:		•											
_	Full Name (Last, First, Middle Initial)						5 .							
В.	NEWSBOYS						Date							_
	Mailing Address 7106 CROSSROADS BLVD STE 2	 215					12	-	D	15	/ Y	2015		
	City S BRENTWOOD	State TN	Zip Code 37027				Trar	sact	tion IE) : S	B21B.	176		
	Purpose of Disbursement		07027	_	-	_								
	EVENT ENTERTAINMENT			0	01		Amou	nt of	Each	Dis	bursen	nent this	s Pe	eriod
	Candidate Name			Cate		y/						100	00.0	00
	Office Sought: House Disbursen	nent For:		1 y	/pe				,		,			
	Senate	Primary	General											
		Other (spe	cify) ▼											
_	State: District: Full Name (Last, First, Middle Initial)													
C.	NEWSBOYS						Date	of Di	sburse	eme	nt			
							M	VI /	D	D	/ Y	YY	Y	7
	Mailing Address 7106 CROSSROADS BLVD STE 2	15					12	4	2	9		2015	_	
	City S	State	Zip Code								D04D			
	BRENTWOOD	TN	37027				Tran	Isaci	tion IL) : S	B21B.	10562		
	Purpose of Disbursement EVENT ENTERTAINMENT			0	01								_	
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	Office Sought: House Disbursen													
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SCHEDULE B (FEC Form 3X)	Llea caparata cabadula(a)	FOR LINE	PAGE 44 OF 93	
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only 21b 27	one) 22 23 28a 28b	24 25 2 28c 29 3
Any information copied from such Reports and Stater or for commercial purposes, other than using the nar				
NAME OF COMMITTEE (In Full) KEEP THE PROMISE III	ile and address of any point	car committee to	Solicit Contributions II	om sacii committee.
Full Name (Last, First, Middle Initial) A. OFFICE MAX			Date of Disburseme	ent
			M M / D D	/ Y = Y = Y
Mailing Address 263 SHUMAN BLVD.			11 12	2015
NAPERVILLE	State Zip Code IL 60563		Transaction ID : S	SB21B.61
Purpose of Disbursement PAC OFFICE SUPPLIES		001	Amount of Each Di	sbursement this Period
Candidate Name		Category/ Type		297.06
Office Sought: House Disburser Senate President State: District:	nent For: Primary General Other (specify)	туре		, , , , , , , , , , , , , , , , , , , ,
Full Name (Last, First, Middle Initial) PROFESSIONAL DATA SERVICE	:S		Date of Disburseme	ent
Mailing Address 824 S MILLEDGE AVE STE 101			12 02	2015
ATHENS	State Zip Code GA 30605		Transaction ID : \$	SB21B.180
Purpose of Disbursement COMPLIANCE CONSULTING		001	Amount of Each Di	sbursement this Period
Candidate Name		Category/ Type		5250.00
Office Sought: House Disburser Senate President State: District:	nent For: Primary General Other (specify)	1,500		
Full Name (Last, First, Middle Initial) C. RED METRICS			Date of Disburseme	_
Mailing Address NA			07	2015
City NA Purpose of Disbursement	State Zip Code GA 00000		Transaction ID : \$	SB21B.10
Candidate Name		001 Category/	Amount of Each Di	sbursement this Period 200000.00
Office Sought: House Disburser Senate President State: District:	ment For: Primary General Other (specify)	Type		7
SUBTOTAL of Disbursements This Page (optional)				205547.06
TOTAL This Period (last page this line number only)				

SCHEDULE B (FEC Form 3X)	Han annual colored 1.7	, FOR LINE	FOR LINE NUMBER: PAGE 45		
ITEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the	(onlook only	(check only one)		
	Detailed Summary Page	X 21b	22 23	24 25 26	
		27	28a 28b	28c 29 30k	
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NAME OF COMMITTEE (In Full)	and address of any poll	55111111111111111111111111111111	Sellon Commoditions	odon oominikee.	
KEEP THE PROMISE III					
Full Name (Last, First, Middle Initial)					
A. RED METRICS			Date of Disburser	ment	
Madica Addis			M M / D M		
Mailing Address NA			08 11	2015	
City	State Zip Code				
NA	GA 00000		Transaction ID	: SB21B.16	
Purpose of Disbursement					
PAC MEDIA		001	Amount of Each I	Disbursement this Period	
Candidate Name		Category/		30000.00	
Office Sought: House	aont For	Туре		230000.00	
Office Sought: House Disbursen Senate	nent For: Primary General				
President	Other (specify)				
State: District:	(-e-===)/ ▼				
Full Name (Last, First, Middle Initial)					
B. RED METRICS			Date of Disburser	ment	
			M M / D	D / Y Y Y Y	
Mailing Address NA			08 20	2015	
City	State 7:- O1				
City S NA	State Zip Code GA 00000		Transaction ID	: SB21B.23	
Purpose of Disbursement					
PAC MEDIA		001	Amount of Each I	Disbursement this Period	
Candidate Name		Category/		200000.00	
0.00		Туре		20000.00	
Office Sought: House Disbursen					
	Primary General Other (specify) ▼				
State: District:	Caron (opoony) ▼				
Full Name (Last, First, Middle Initial)					
C. RED METRICS			Date of Disburser	ment	
			M M / D	D / Y Y Y Y	
Mailing Address NA			09 03		
City	State 75 C 1				
,	State Zip Code GA 00000		Transaction ID	: SB21B.30	
Purpose of Disbursement	00000				
PÁC MEDIA		001	Amount of Each I	Disbursement this Period	
Candidate Name		Category/			
		Type		200000.00	
Office Sought: House Disbursen					
	Other (specify) —				
State: District:	Other (specify) ▼				
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SUBTOTAL of Disbursements This Page (optional)		.		700000.00	
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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	one) 22 23 24 25 26 28a 28b 28c 29 30
Any information copied from such Reports and States or for commercial purposes, other than using the nar			
NAME OF COMMITTEE (In Full) KEEP THE PROMISE III			
Full Name (Last, First, Middle Initial)			Data of Diahumanan
A. RED METRICS			Date of Disbursement
Mailing Address NA			09 28 2015
,	State Zip Code		Transaction ID : SB21B.43
NA Purpose of Disbursement	GA 00000		
PAC MEDIA		001	Amount of Each Disbursement this Period
Candidate Name		Category/	275000.00
Office Sought: House Disburse	ment For:	Туре	213000.00
Senate President	Primary General Other (specify) ▼		
State: District:			
Full Name (Last, First, Middle Initial) B. RED METRICS			Date of Disbursement
Mailing Address NA			10 05 2015
City NA Purpose of Disbursement	State Zip Code GA 00000		Transaction ID : SB21B.46
PAC MEDIA		001	Amount of Each Disbursement this Period
Candidate Name		Category/ Type	260000.00
Office Sought: House Senate President State: Disburse	ment For: Primary General Other (specify) ▼		
Full Name (Last, First, Middle Initial) C. RED METRICS			Date of Disbursement
Mailing Address NA			10 13 2015
NA	State Zip Code GA 00000		Transaction ID : SB21B.49
Purpose of Disbursement PAC MEDIA		001	
Candidate Name		001 Category/ Type	Amount of Each Disbursement this Period 250000.00
Office Sought: House Senate President State: Disburse	nent For: Primary General Other (specify)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
SUBTOTAL of Disbursements This Page (optional))		785000.00

SCHEDULE B (FEC Form 3X)	Llea concrete cohedula/a	FOR LINE	PAGE 47 OF 9	
ITEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the Detailed Summary Page	(check only 21b 27	one) 22 23 28a 28b	24 25 2 28c 29 3
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or for commercial purposes, other than using the nare NAME OF COMMITTEE (In Full) KEEP THE PROMISE III	ne and address of any polit	icai committee to	Solicit contributions fi	oni such committee.
Full Name (Last, First, Middle Initial)			D	
A. RED METRICS			Date of Disbursem	
Mailing Address NA			10 / 21	2015
	State Zip Code		Transaction ID :	SB21B.51
NA Purpose of Disbursement	GA 00000			
PAC MEDIA		001	Amount of Each Di	isbursement this Period
Candidate Name		Category/		250000.00
Office Sought: House Disburser	mant Favi	Туре		230000.00
Office Sought: House Disburser Senate President	ment For: Primary General Other (specify) ▼			
State: District:				
Full Name (Last, First, Middle Initial)			Data of Diabourg	ont
B. RED METRICS			Date of Disbursem	
Mailing Address NA			11 03	2015
•	State Zip Code GA 00000		Transaction ID :	SB21B.55
NA Purpose of Disbursement	GA 00000			
PÁC MEDIA		001	Amount of Each Di	isbursement this Period
Candidate Name		Category/ Type		250000.00
Office Sought: House Senate President State: Disburser	ment For: Primary General Other (specify) ▼			
Full Name (Last, First, Middle Initial) C. RED METRICS			Date of Disbursem	ent
Mailing Address NA			11 / 10	2015
City	State Zip Code GA 00000		Transaction ID :	SB21B.59
Purpose of Disbursement				
PAC MEDIA Candidate Name		001 Category/	Amount of Each Di	isbursement this Period 250000.00
Office Sought: House Disburser	ment For:	Туре		
Senate President	Primary General Other (specify) ▼			
State: District:				
SUBTOTAL of Disbursements This Page (optional)		·····•		750000.00
TOTAL This Period (last page this line number only))			

	HEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	
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/ /	IAME OF COMMITTEE (In Full) KEEP THE PROMISE III	, , , , , , , , , , , , , , , , , , ,		
	ull Name (Last, First, Middle Initial)			Bata of Bishamanana
Α.	RED METRICS			Date of Disbursement
N	Mailing Address NA			11 20 2015
	•	State Zip Code		Transaction ID : SB21B.182
	IA Turpose of Disbursement	GA 00000		
	MEDIA		001	Amount of Each Disbursement this Period
C	Candidate Name		Category/	500000.00
7	Office Sought: House Disburser	ment For:	Type	330000.00
	Senate President	Primary General Other (specify) ▼		
	tate: District:			
	ull Name (Last, First, Middle Initial) RED METRICS			Date of Disbursement
N	failing Address NA			12 10 2015
1	Sity IA Turpose of Disbursement	State Zip Code GA 00000		Transaction ID : SB21B.183
	MEDIA		001	Amount of Each Disbursement this Period
	andidate Name		Category/ Type	500000.00
	Office Sought: House Disburser Senate President tate: District:	nent For: Primary General Other (specify) ▼		
	ull Name (Last, First, Middle Initial)			Date of Disbursement
N	Mailing Address NA			12 15 2015
N	IA .	State Zip Code GA 00000		Transaction ID : SB21B.184
_	Purpose of Disbursement VIDEO PRODUCTION Candidate Name		001 Category/ Type	Amount of Each Disbursement this Period 4042.01
	Office Sought: House Disburser Senate President State: District:	nent For: Primary General Other (specify)	. 790	
SU	Senate President	Primary General Other (specify) ▼		1004042.01

SCHEDULE B (FEC Form 3X)	Lies concrete cohodule(a)			PAGE 49 OF 93				
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only X 21b 27	one) 22 23 28a 28b	24 25 26 28c 29 30l				
Any information copied from such Reports and State or for commercial purposes, other than using the nar								
NAME OF COMMITTEE (In Full) KEEP THE PROMISE III	ine and address of any pointed	T COMMITTEE TO	SONOR CONTRIBUTION	o moni suon committee.				
Full Name (Last, First, Middle Initial)								
A. SGA PRODUCTION			Date of Disburs					
Mailing Address NA				12 31 2015				
,	State Zip Code		Transaction ID : SB21B.185					
NA Purpose of Disbursement	GA 00000		Transaction	7. 05215.100				
VIDEO PRODUCTION		001	Amount of Each	Disbursement this Period				
Candidate Name		Category/		4040.05				
		Туре		4648.85				
Senate President	ment For: Primary General Other (specify) ▼							
State: District:								
Full Name (Last, First, Middle Initial) B. SOUTHWEST AIRLINES			Date of Disburs	ement				
Mailing Address 2702 LOVE FIELD DRIVE				2015				
City DALLAS Purpose of Disbursement	State Zip Code TN 75235		Transaction II	D : SB21B.188				
TRAVEL EXPENSE		001	Amount of Each	Disbursement this Period				
Candidate Name		Category/ Type	7	250.96				
Office Sought: House Senate President State: Disburse	ment For: Primary General Other (specify) ▼							
Full Name (Last, First, Middle Initial) C. SPAETH COMMUNICATIONS			Date of Disburs					
Mailing Address 8150 N CENTRAL EXPWY STE 1410				12 2015				
DALLAS	State Zip Code TX 75206		Transaction II	D : SB21B.62				
Purpose of Disbursement PAC COMMUNICATIONS CONSULTING Candidate Name		001 Category/ Type	Amount of Each	Disbursement this Period				
Office Sought: House Disburse	ment For: Primary General Other (specify) ▼	.,,,,						
SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only				14899.81				

SCHEDULE B (FEC Form 3X)			-					
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)	23 24 25 26				
	Detailed Summary Page	27		28b 28c 29 30b				
Any information copied from such Reports and Statem								
or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full)	e and address of any politic	ai committee to	SOlicit contribt	utions from such committee.				
KEEP THE PROMISE III								
Full Name (Last, First, Middle Initial)			Date of Dis	huraamant				
A. SPAETH COMMUNICATIONS			M M /	bursement				
Mailing Address 8150 N CENTRAL EXPWY STE 14	10	0		12 02 2015				
DALLAS	State Zip Code TX 75206		Transaction ID : SB21B.189					
Purpose of Disbursement PAC COMMUNICATIONS CONSULTING		001	Amount of E	Each Disbursement this Period				
Candidate Name		Category/		10000.00				
Office Sought: House Disbursem		Type		10000.00				
Senate	Primary General Other (specify)							
State: District:								
Full Name (Last, First, Middle Initial) B. SUPER 8 MOTEL			Date of Dis	hursamant				
5. SUPER 6 MOTEL			M M /	D D / Y Y Y Y				
Mailing Address 22 SYLVAN WAY			12	27 2015				
,	State Zip Code NJ 07054		Transaction	on ID : SB21B.192				
TRAVEL EXPENSE		001	Amount of E	Each Disbursement this Period				
Candidate Name		Category/ Type		110.28				
	nent For: Primary General Other (specify) ▼							
Full Name (Last, First, Middle Initial) C. SUPER 8 MOTEL			Date of Dis	bursement				
Mailing Address 22 SYLVAN WAY			12	28 2015				
PARSIPPANY	State Zip Code NJ 07054		Transaction	on ID : SB21B.195				
Purpose of Disbursement TRAVEL EXPENSE		004						
Candidate Name		001 Category/ Type	Amount of E	Each Disbursement this Period 55.14				
President	nent For: Primary General Other (specify) ▼	.,,,,,						
State: District:								
SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only).				10165.42				

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: (check only one)		PAGE 51 OF 93
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	Ceneck only X 21b 27	one) 22 23 28a 28b	24 25 2 28c 29 3
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NAME OF COMMITTEE (In Full) KEEP THE PROMISE III	is and address of any point	<u> </u>	Solid Commissions II	c dadii definintadi.
Full Name (Last, First, Middle Initial)			Date of Dist	
A. SUPER 8 MOTEL			Date of Disbursem	ent
Mailing Address 22 SYLVAN WAY			12 28	2015
PARSIPPANY	State Zip Code NJ 07054		Transaction ID:	SB21B.194
Purpose of Disbursement TRAVEL EXPENSE		001	Amount of Each Di	sbursement this Period
Candidate Name		Category/ Type		55.14
	nent For: Primary General Other (specify)	1,100		
State: District:				
Full Name (Last, First, Middle Initial) B. SUPER 8 MOTEL			Date of Disbursem	ent
Mailing Address 22 SYLVAN WAY			12 28	2015
PARSIPPANY	State Zip Code NJ 07054		Transaction ID:	SB21B.193
Purpose of Disbursement TRAVEL EXPENSE		001	Amount of Each Di	sbursement this Period
Candidate Name		Category/ Type		55.14
	nent For: Primary General Other (specify)			
Full Name (Last, First, Middle Initial) C. UBER TECHNOLOGIES			Date of Disbursem	
Mailing Address 1455 MARKET ST			12 / 14	2015
SAN FRANCISCO	State Zip Code CA 94103		Transaction ID :	SB21B.199
Purpose of Disbursement TRAVEL EXPENSE		001	Amount of Each Di	sbursement this Period
Candidate Name		Category/ Type		79.17
	nent For: Primary General Other (specify)			,
SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only).				189.45

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ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE (check only	one) 22 23 24 25 2			
Any information copied from such Reports and Stater	ments may not be sold or used	d by any person	28a 28b 28c 29 3 on for the purpose of soliciting contributions			
or for commercial purposes, other than using the nan NAME OF COMMITTEE (In Full) KEEP THE PROMISE III	ne and address of any politica	I committee to	solicit contributions from such committee.			
Full Name (Last, First, Middle Initial) A. UBER TECHNOLOGIES Mailing Address 1455 MARKET ST			Date of Disbursement 12 14 2015			
			12 14 2015			
SAN FRANCISCO	State Zip Code CA 94103		Transaction ID : SB21B.198			
Purpose of Disbursement TRAVEL EXPENSE Candidate Name		001	Amount of Each Disbursement this Period			
Office Sought: House Disburser Senate President State: District:	ment For: Primary General Other (specify)	Category/ Type	52.86			
Full Name (Last, First, Middle Initial) B. Mailing Address			Date of Disbursement			
	State Zip Code					
Purpose of Disbursement Candidate Name		Category/	Amount of Each Disbursement this Period			
Office Sought: House Disburser Senate President State: District:	ment For: Primary General Other (specify) ▼	Type				
Full Name (Last, First, Middle Initial) C.			Date of Disbursement			
Mailing Address						
City	State Zip Code					
Purpose of Disbursement Candidate Name		Category/ Type	Amount of Each Disbursement this Period			
Office Sought: Senate President State: Disburser	ment For: Primary General Other (specify) ▼					
SUBTOTAL of Disbursements This Page (optional)		·····	52.86			
TOTAL This Period (last page this line number only))	>	3564309.76			

SCHEDULE B (FEC Form 3X)	Llee congrete cohedula(a)	FOR LINE	-	PAGE 53 OF 93				
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(orlean orly orle)		00				
	Detailed Summary Page	21b 27		23 24 25 26 28b 28c 29 30l				
Any information copied from such Reports and Stater								
or for commercial purposes, other than using the nan NAME OF COMMITTEE (In Full)	ne and address of any politic	cai committee to	Solicit contribut	lions from such committee.				
KEEP THE PROMISE III								
Full Name (Last, First, Middle Initial)			Data of Biolo					
A. KEEP THE PROMISE PAC			Date of Disb					
Mailing Address PO BOX 92225				07 08 2015				
•	State Zip Code		Transaction ID : SB22.12					
AUSTIN Purpose of Disbursement	TX 78709		Transaction	111D . ODZZ.1Z				
TRANSFER		008	Amount of E	ach Disbursement this Period				
Candidate Name		Category/ Type		200000.00				
Office Sought: House Disburser	ment For:	.,,,,		, , , , , , , , , , , , , , , , , , , ,				
Senate	Primary General							
State: District:	Other (specify) ▼							
Full Name (Last, First, Middle Initial)								
В.			Date of Disb	ursement				
A. 10			M = M /	D D / Y Y Y Y				
Mailing Address								
City	State Zip Code							
Purpose of Disbursement								
Candidate Name			Amount of E	ach Disbursement this Period				
Candidate Name		Category/ Type						
Office Sought: House Disburser	ment For:	.,,,,	,	,				
Senate	Primary General							
State: District:	Other (specify) ▼							
Full Name (Last, First, Middle Initial)								
C.			Date of Disb	ursement				
Mailing Address			M = M /	D D / Y Y Y Y Y				
	State Zip Code							
Oity	State Zip Code							
Purpose of Disbursement								
Candidate Name			Amount of E	ach Disbursement this Period				
Canadate Name		Category/ Type						
Office Sought: House Disburser	ment For:)	7				
Senate	Primary General							
State: District:	Other (specify) ▼							
State. State.								
SUBTOTAL of Disbursements This Page (optional)		·····		200000.00				
		<u> </u>		20000.00				
TOTAL This Period (last page this line number only))			200000.00				

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES	
TEMIZED INDEPENDENT EXPENDITORES	PAGE 54 OF 93 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
KEEP THE PROMISE III	C C00575423
Check if 24-hour report 48-hour report I	New report Amends report filed on M M / D D / Y Y Y Y Y
Full Name of Payee	Date of Public Distribution/Dissemination
FACEBOOK	M M / D D / Y Y Y Y Y 12 03 2015
[MEMO ITEM] Mailing Address 1 HACKER WAY	12 03 2013
I HACKER WAT	Amount
City State	Zip Code 1657.33
MENLO PARK CA	94025 Transaction ID : SE.90 Date of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA PRODUCTION/PLACEMENT	Category/ Type 001 12 03 2015
Name of Federal Candidate	
RAFAEL 'TED' EDWARD CRUZ	Support Office Sought: House District: 00
RAFAEL TED EDWARD CROZ	Oppose President Senate State: IA
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General 2016 Other (specify)
Full Name of Payee	Date of Public Distribution/Dissemination
FACEBOOK	12 08 2015
Mailing Address 1 HACKER WAY	
	Amount
City State	Zip Code 3633.39
MENLO PARK CA	94025 Transaction ID : SE.91 Date of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA PRODUCTION/PLACEMENT	Category/ Type 001 12 08 2015
Name of Federal Candidate	Support Office Sought: House District:
RAFAEL 'TED' EDWARD CRUZ	Oppose President Senate State: IA
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General 2016 Other (specify)
, , , , , , , , , , , , , , , , , , ,	Outer (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
	enditures reported herein were not made in cooperation, consultation, or concert uthorized committee or agent of either, or (if the reporting entity is not a political
MR. JON FRANCIS	M M / D D / Y Y Y

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	CHEDULE E (FEC Form 3X) EMIZED INDEPENDENT EXPENDITURES	PAGE 55 OF 93
		FOR LINE 24 OF FORM 3X
	AME OF COMMITTEE (In Full) KEEP THE PROMISE III	FEC IDENTIFICATION NUMBER ▼
r	REEP THE PROMISE III	C C00575423
С	heck if 24-hour report 48-hour report New report Amends report	filed on fil
	Full Name of Payee	Date of Public Distribution/Dissemination
	FACEBOOK	12 09 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	[MEMO ITEM] Mailing Address	12 09 2015
	1 HACKER WAY	Amount
	City State Zip Code	6842.67
	MENLO PARK CA 94025	Transaction ID : SE.93
		Date of Disbursement or Obligation
	Purpose of Expenditure DIGITAL MEDIA PRODUCTION/PLACEMENT Category/ Type 001	12 / 09 / 2015
	Name of Federal Candidate Support	Office Sought: House District: 00
	RAFAEL 'TED' EDWARD CRUZ Oppose	President Senate State: IA
	Calendar Year-To-Date	Disbursement For: Primary General
		Other (specify)
	Full Name of Payee	Date of Public Distribution/Dissemination
	FACEBOOK	M M / D D / Y Y Y Y
	[MEMO ITEM]	12 10 2015
	Mailing Address 1 HACKER WAY	Amount
	City State Zip Code	7749.71
	MENLO PARK CA 94025	Transaction ID : SE.95 Date of Disbursement or Obligation
	Purpose of Expenditure Category/	M = M / D = D / Y = Y = Y
	DIGITAL MEDIA PRODUCTION/PLACEMENT Outgot/7 Type 001	12 10 2015
	Name of Federal Candidate Support	Office Sought: House District:00
	RAFAEL 'TED' EDWARD CRUZ	President Senate State: IA
		Disbursement For: X Primary General
		2016
		Other (specify)
	(a) SUBTOTAL of Itemized Independent Expenditures	0.00
	(1) OUDTOTAL (11): 1 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	(b) SUBTOTAL of Unitemized Independent Expenditures	·
	(a) TOTAL Independent Europedituses	
	(c) TOTAL Independent Expenditures	
	Under penalty of perjury I certify that the independent expenditures reported herein were no	
	with, or at the request or suggestion of, any candidate or authorized committee or agent of eparty committee) any political party committee or its agent.	either, or (if the reporting entity is not a political
	Fact, 12	
	MR. JON FRANCIS	M M / D D / Y Y Y

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SCHEDULE E (FEC Form 3X)

	CHEDOLL L (FLC FOIIII 3X)			
TI	EMIZED INDEPENDENT EXPENDITURES		PAGE 56 O FOR LINE 24 OF	
V/	AME OF COMMITTEE (In Full)			
	KEEP THE PROMISE III		FEC IDENTIFICATION N	OMRFH ▲
_			C C00575423	
_ Cł	heck if 24-hour report 48-hour report New report Amends report		M / D D / Y	Y Y Y
_	Full Name of Payee	Date of	f Public Distribution/Disse	mination
	FACEBOOK		12 / D D / Y	2015
	[MEMO ITEM] Mailing Address 1 HACKER WAY		12 111 1	2015
	1 HACKER WAT	Amoun	nt	
	City State Zip Code			7874.32
	MENLO PARK CA 94025		ction ID : SE.97 f Disbursement or Obliga	tion
	Purpose of Expenditure DIGITAL MEDIA PRODUCTION/PLACEMENT Category/ Type 001	M		2015
	Name of Federal Candidate Support C	Office Sought:	: House Distri	ct:00
	RAFAEL 'TED' EDWARD CRUZ Oppose	Y Presider		
	55070 77	Disbursement	For: Primary	General
	Per Election for Office Sought		her (specify) ▶	
	Full Name of Payee	Date o	of Public Distribution/Disse	emination
	FACEBOOK [MEMO ITEM]		12 12 Y	2015
	Mailing Address 1 HACKER WAY			20.0
	TINONERWAN	Amoun	nt	
	City State Zip Code			7889.28
	MENLO PARK CA 94025		ction ID : SE.99 of Disbursement or Obliga	tion
	Purpose of Expenditure DIGITAL MEDIA PRODUCTION/PLACEMENT Category/ Type 001	M		2015
	Name of Federal Candidate Support	Office Sought	t: House Distri	ct:00
	RAFAEL 'TED' EDWARD CRUZ	X Preside		IΛ
		Disbursement		General
		2016	ther (specify)	
	<u> </u>			
	(a) SUBTOTAL of Itemized Independent Expenditures	•	7 7	0.00
	(b) SUBTOTAL of Unitemized Independent Expenditures	· [40.
	(c) TOTAL Independent Expenditures	. [
	Under penalty of perjury I certify that the independent expenditures reported herein were no with, or at the request or suggestion of, any candidate or authorized committee or agent of e party committee) any political party committee or its agent.			
	MR. JON FRANCIS [Electronically Filed]	M M / / 01	31 / 2016	Y
	[Electronically Filed] Date	UI	31 2010	

SCHEDULE E (FEC Form 3X) TEMIZED INDEPENDENT EXPENDITURES	PAGE 57 OF 93
NAME OF COMMITTEE //- E.IIV	FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full) KEEP THE PROMISE III	FEC IDENTIFICATION NUMBER ▼
	C C00575423
Check if 24-hour report 48-hour report New report Amends report filed on	M = M / D = D / Y = Y = Y
	Pate of Public Distribution/Dissemination
FACEBOOK [MEMO ITEM]	12 13 2015
Mailing Address 1 HACKER WAY	mount
City State Zip Code	8058.70
Da	ansaction ID : SE.101 Date of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA PRODUCTION/PLACEMENT Category/ Type 001	12 13 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office Sc	ought: House District: 00
DAFAEL ITEDI EDIMADD ODLIZ	resident Senate State: IA
Calendar Year-To-Date Disburse	ement For: X Primary General
Per Election for Office Sought 89055.24 2016	Other (specify)
	Date of Public Distribution/Dissemination
FACEBOOK [MEMO ITEM]	12 14 2015
Mailing Address	Amount
City State Zip Code	2469.34
MENLO PARK CA 94025 Tra	ansaction ID : SE.103 Date of Disbursement or Obligation
Purpose of Expenditure	M M / D D / Y Y Y Y
DIGITAL MEDIA PRODUCTION/PLACEMENT Outline Type 001	12 14 2015
Name of Federal Candidate Support Office So	ought: House District: 00
DAFAEL TED FOWARD COUZ	resident Senate State: IA
	ement For: X Primary General
Per Election for Office Sought 100001.49 2016	Other (specify)
· · · · · · · · · · · · · · · · · · ·	
(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	7 7
Under penalty of perjury I certify that the independent expenditures reported herein were not made with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or party committee) any political party committee or its agent.	
MR. JON FRANCIS	/ B B / Y Y Y

[Electronically Filed]

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Date

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2016

	CHEDULE E (FEC Form 3X) EMIZED INDEPENDENT EXPENDITURES			PAGE 58 OF 93
N.I	AME OF COMMITTEE (I. F.II)			FOR LINE 24 OF FORM 3X
	AME OF COMMITTEE (In Full) KEEP THE PROMISE III			FEC IDENTIFICATION NUMBER ▼
<u>'</u>	CEL THE FROM SE III			C C00575423
С	neck if 24-hour report 48-hour report New re	port Amends repo	ort filed	on Mam / Dab / Yayayay
	Full Name of Payee			Date of Public Distribution/Dissemination
	FACEBOOK [MEMO ITEM]			12 21 2015
	Mailing Address 1 HACKER WAY			12 21 2010
	I HACKER WAT			Amount
	City State	Zip Code		5140.26
	MENLO PARK CA	94025		Transaction ID : SE.110
	Purpose of Expenditure			Date of Disbursement or Obligation
	DIGITAL MEDIA PRODUCTION/PLACEMENT	Category/ Type 001		12 / 21 / 2015
	Name of Federal Candidate	X Support	Office	e Sought: House District:00
	RAFAEL 'TED' EDWARD CRUZ	Oppose	X	President Senate State: IA
	Calendar Year-To-Date		-	ursement For: X Primary General
	Per Election for Office Sought	124461.65	2016	
	Full Name of Payee			Date of Public Distribution/Dissemination
	FACEBOOK			M M / D D / Y Y Y Y
	[MEMO ITEM]			12 22 2015
	Mailing Address 1 HACKER WAY			Amount
	City State	Zip Code		5140.26
	MENLO PARK CA	94025		Transaction ID : SE.113 Date of Disbursement or Obligation
	Purpose of Expenditure DIGITAL MEDIA PRODUCTION/PLACEMENT	Category/ Type 001		12 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Federal Candidate	Support	Office	e Sought: House District: 00
	RAFAEL 'TED' EDWARD CRUZ	Oppose		President Senate State: IA
	Calendar Year-To-Date			ursement For: X Primary General
	Per Election for Office Sought	132468.98	2016	
	, , ,			Other (specify) F
	(a) SUBTOTAL of Itemized Independent Expenditures		▶	0.00
	(b) SUBTOTAL of Unitemized Independent Expenditures		▶	7 7
	(c) TOTAL Independent Expenditures			
	(c) TOTAL Independent Experiatores		·· •	
	Under penalty of perjury I certify that the independent expenditure with, or at the request or suggestion of, any candidate or authorize party committee) any political party committee or its agent.			
	MR. JON FRANCIS	nically Filed]		1 31 2016
	[Electron	nicany rueuj Date	o ا	1 2016

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NAME OF COMMITTEE (In Full) KEEP THE PROMISE III

Check if

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITU

E OF COMMITTEE (In Full)	PAGE 59 OF 93 FOR LINE 24 OF FORM 3X
	FEC IDENTIFICATION NUMBER ▼
EP THE PROMISE III	C C00575423
ck if 24-hour report 48-hour report New report Amends report filed	on M = M / D = D / Y = Y = Y
Full Name of Payee	Date of Public Distribution/Dissemination
FACEBOOK	12 22 2015
[MEMO ITEM] Mailing Address	12 22 2015
1 HACKER WAY	Amount
City State Zip Code	5538.00
,	Transaction ID : SE.114
Purpose of Evnanditure	Date of Disbursement or Obligation
DIGITAL MEDIA PRODUCTION/PLACEMENT Category/ Type 001	12 / 22 / 2015
lame of Federal Candidate Support Office	Sought: House District: 00
DAFAEL ITEDI EDIMADO ODUZ	President Senate State: IA
Calendar Year-To-Date Disbu	rsement For: X Primary General
Per Election for Office Sought 138006.98 2016	Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
FACEBOOK [MEMO ITEM]	12 22 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1 HACKER WAY	12 22 2013
I HACKER WAY	Amount
City State Zip Code	140.81
•	Transaction ID : SE.115
	Date of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA PRODUCTION/PLACEMENT Category/ Type 001	12 22 2015
lame of Federal Candidate Support Office	Sought: House District:00
	President Senate State: IA
RAFAEL 'TED' EDWARD CRUZ Oppose	

Under penalty of perjury I certify that the inde with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

MR. JON FRANCIS	[Electronically Filed]	Date	01 /	31	2016
Signature					

SCHEDULE E (FEC Form 3X)

CONTROLL C (LEG)				
TEMIZED INDEPENDENT	EXPENDITURES			PAGE 60 OF 93 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			FE	EC IDENTIFICATION NUMBER ▼
KEEP THE PROMISE	III		C	
Check if 24-hour report	48-hour report New	report Amends repo	ort filed on	M / D = D / Y = Y = Y
Full Name of Payee			Date of F	Public Distribution/Dissemination
FACEBOOK [MEMO ITEM]			M 12	
Mailing Address 1 HACKER	WAY		Amount	المتنتما لثنا لـ
City	State	Zip Code		2550.14
MENLO PARK	CA	94025		on ID : SE.117 Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA PRODUCTION)N/PLACEMENT	Category/ Type 001	M	M / D D / Y Y Y
Name of Federal Candidate		Support	Office Sought:	House District: 00
RAFAEL 'TED' EDWARD CRU	JZ	Oppose		
Calendar Year-To-Date Per Election for Office So	ought	142379.43	Disbursement Fo	
Full Name of Payee				er (specify)
FACEBOOK			M	
[MEMO ITEM] Mailing Address			12	2 23 2015
1 HACKER	NAY		Amount	
City	State	Zip Code		132.59
MENLO PARK	CA	94025		on ID : SE.118 Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA PRODUCTION)N/PLACEMENT	Category/ Type 001	M 12	
Name of Federal Candidate		Support	Office Sought:	House District:00
RAFAEL 'TED' EDWARD CRI	JZ	Oppose	X President	
Calendar Year-To-Date		142512.02	Disbursement F	For: X Primary General
Per Election for Office So	ought	142512.02		er (specify) •
(a) SUBTOTAL of Itemized Inc.	dependent Expenditures		,	0.00
(b) CURTOTAL of Uniterpized	Independent Expenditures			
(b) SOBTOTAL OF OTHER MEZON	пиерепиетт схрепинитез		>	4 4
(c) TOTAL Independent Expen	nditures		··· •	7
	ify that the independent expenditu estion of, any candidate or authori party committee or its agent.			
MR. JON FRANCIS		tronically Filed] Date	e 01	31 2016
Signature		Date		للننبا لت

	CHEDULE E (FEC Form 3X) EMIZED INDEPENDENT EXPENDITURES		PAGE 61 OF 93 FOR LINE 24 OF FORM 3X
	AME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
ŀ	KEEP THE PROMISE III		C C00575423
С	heck if 24-hour report 48-hour report New report	Amends repo	rt filed on
	Full Name of Payee		Date of Public Distribution/Dissemination
	FACEBOOK [MEMO ITEM]		12 24 2015
	Mailing Address 1 HACKER WAY		12 24 2010
	THACKER WAT		Amount
	City State Zi	p Code	2762.36
	MENLO PARK CA 9	4025	Transaction ID : SE.120
	Purpose of Expenditure		Date of Disbursement or Obligation
	DIGITAL MEDIA PRODUCTION/PLACEMENT	Category/ Type 001	12 24 7 2015
	Name of Federal Candidate	X Support	Office Sought: House District: 00
	RAFAEL 'TED' EDWARD CRUZ	Oppose	President Senate State: IA
	Calendar Year-To-Date Per Election for Office Sought	7342.70	Disbursement For: Primary General 2015
	5 11 11 12		Other (specify) ▶
	Full Name of Payee FACEBOOK		Date of Public Distribution/Dissemination
	[MEMO ITEM]		12 24 2015
	Mailing Address 1 HACKER WAY		Amount
	City State Zi	ip Code	266.94
	MENLO PARK CA 9	94025	Transaction ID : SE.121 Date of Disbursement or Obligation
	Purpose of Expenditure DIGITAL MEDIA PRODUCTION/PLACEMENT	Category/ Type 001	Date of Disburschick of Colligation
	Name of Federal Candidate	X Support	Office Sought: House District: 00
	RAFAEL 'TED' EDWARD CRUZ	Oppose	Troube Biotriot.
		Oppose	President State State.
	Calendar Year-To-Date Per Election for Office Sought	143513.38	Disbursement For:
	(a) SUBTOTAL of Itemized Independent Expenditures		0.00
	(a) SOBTOTAL OF REMIZED INDEPENDENT EXPENDITURES		0.00
	(b) SUBTOTAL of Unitemized Independent Expenditures		•
	(c) TOTAL Independent Expenditures		>
	Under penalty of perjury I certify that the independent expenditures re with, or at the request or suggestion of, any candidate or authorized comparty committee) any political party committee or its agent.		
	MR. JON FRANCIS		M M / D D / Y Y Y

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SCHEDULE E (FEC Form 3X)		
TEMIZED INDEPENDENT EXPENDITURES		PAGE 62 OF 93 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
KEEP THE PROMISE III		C C00575423
Check if 24-hour report 48-hour report Ne	ew report Amends repor	t filed on Man / Dad / Yayayay
Full Name of Payee FACEBOOK [MEMO ITEM]		Date of Public Distribution/Dissemination
Mailing Address 1 HACKER WAY		Amount
City State	Zip Code	5445.16
MENLO PARK CA	94025	Transaction ID : SE.122 Date of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA PRODUCTION/PLACEMENT	Category/ Type 001	12 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	X Support	Office Sought: House District: 00
RAFAEL 'TED' EDWARD CRUZ	Oppose	President Senate State: IA
Calendar Year-To-Date Per Election for Office Sought	12787.86	Disbursement For:
Full Name of Payee FACEBOOK [MEMO ITEM] Mailing Address ALLACKER WAY		Date of Public Distribution/Dissemination
1 HACKER WAY		Amount
City State	Zip Code	598.23
MENLO PARK CA	94025	Transaction ID : SE.123 Date of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA PRODUCTION/PLACEMENT	Category/ Type 001	12 / 24 / 2015
Name of Federal Candidate	X Support	Office Sought: House District: 00
RAFAEL 'TED' EDWARD CRUZ	Oppose	President Senate State: IA
Calendar Year-To-Date Per Election for Office Sought	144111.61	Disbursement For:
(a) SUBTOTAL of Itemized Independent Expenditures		0.00
(b) SUBTOTAL of Unitemized Independent Expenditures		·
(c) TOTAL Independent Expenditures		·
Under penalty of perjury I certify that the independent expend with, or at the request or suggestion of, any candidate or auth party committee) any political party committee or its agent.		
MR. JON FRANCIS [EI	lectronically Filed]	01 31 2016

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EMIZED INDEPENDENT EXPENDITURE	S			PAGE 63 OF 93
ME OF COMMITTEE (In Fall)			T	FOR LINE 24 OF FORM 3X
ME OF COMMITTEE (In Full) EEP THE PROMISE III			FEC I	DENTIFICATION NUMBER ▼
CEL THE FROM OF III			С	C00575423
eck if 24-hour report 48-hour report	New rep	port Amends repo	ort filed on	/ D = D / Y = Y = Y
Full Name of Payee			Date of Publ	ic Distribution/Dissemination
FACEBOOK			12	/ D D / Y Y Y Y Y Y Y Y Z 25 2015
[MEMO ITEM] Mailing Address			12	2010
1 HACKER WAY			Amount	
City	State	Zip Code		5222.15
MENLO PARK	CA	94025	Transaction I	
Purpose of Expenditure				ursement or Obligation
DIGITAL MEDIA PRODUCTION/PLACEMENT		Category/ Type 001	12	25 / 2015
Name of Federal Candidate		Support	Office Sought:	House District: 00
RAFAEL 'TED' EDWARD CRUZ		Oppose		Senate State: IA
Calendar Year-To-Date			Disbursement For:	
Per Election for Office Sought		153665.28	2016	pecify) ►
Full Name of Payee			Date of Publ	ic Distribution/Dissemination
FACEBOOK			MIM	/ DID / YIYIY
[MEMO ITEM] Mailing Address			12	25 2015
1 HACKER WAY			Amount	
City	State	Zip Code		600.64
MENLO PARK	CA	94025	Transaction I	D : SE.127 ursement or Obligation
Purpose of Expenditure DIGITAL MEDIA PRODUCTION/PLACEMENT		Category/ 001	M M M 12	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
DIGITAL WEBIAT RODGETION/I LAGEMENT		Type 001	12	25 2015
Name of Federal Candidate		Support	Office Sought:	House District: 00
RAFAEL 'TED' EDWARD CRUZ		Oppose		Senate State: IA
Calendar Year-To-Date			Disbursement For:	Primary General
Per Election for Office Sought		154265.92	2016 Other (s	pecify) ▶
			Outer (s	P
(a) SUBTOTAL of Itemized Independent Expendit	tures			0.00
(a) CODICINE OF ROTHERS INSOPERIOR EXPONE				0.00
(b) SUBTOTAL of Unitemized Independent Exper	nditures			
, ,			-	
(c) TOTAL Independent Expenditures				
(5) 1911 Independent Experiation				

party committee) any political party committee or its agent.

MR. JON FRANCIS	[Electronically Filed]	Date	01 /	31	/	2016
Signature						

	CHEDULE E (FEC FORM 3X) EMIZED INDEPENDENT EXPENDITURES			PAGE 64 OF 93
NIZ	ME OF COMMITTEE (In Full)			FOR LINE 24 OF FORM 3X
	EEP THE PROMISE III			FEC IDENTIFICATION NUMBER ▼
				C C00575423
Ch	eck if 24-hour report 48-hour report New rep	port Amends repo	rt filed	on M = M / D = D / Y = Y = Y
	Full Name of Payee			Date of Public Distribution/Dissemination
	FACEBOOK [MEMO ITEM]			12 / 26 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 1 HACKER WAY			
				Amount
	City State	Zip Code		5415.24
	MENLO PARK CA	94025		Transaction ID : SE.129
	Purpose of Expenditure	Category/	_	Date of Disbursement or Obligation
	DIGITAL MEDIA PRODUCTION/PLACEMENT	Type 001	_	12 26 2015
	Name of Federal Candidate	X Support	Office	Sought: House District: 00
	RAFAEL 'TED' EDWARD CRUZ	Oppose	X	President Senate State: IA
	Calendar Year-To-Date			rsement For: X Primary General
	Per Election for Office Sought	161983.57	2016	Other (specify) ▶
	Full Name of Payee			Date of Public Distribution/Dissemination
	FACEBOOK			12 26 2015
				12 20 2010
	THACKER WAT			Amount
	City State	Zip Code		392.57
	MENLO PARK CA	94025		Transaction ID : SE.131 Date of Disbursement or Obligation
	Purpose of Expenditure	Category/	\neg	Man / Dad / Yayayay
	DIGITAL MEDIA PRODUCTION/PLACEMENT	Type 001	41	12 26 2015
	Name of Federal Candidate	X Support	Office	e Sought: House District: 00
	RAFAEL 'TED' EDWARD CRUZ	Oppose	X	President Senate State: IA
	Calendar Year-To-Date			ırsement For: X Primary General
	Per Election for Office Sought	164973.81	2016	Other (specify)
	(a) SUBTOTAL of Itemized Independent Expenditures		•	0.00
	(b) SUBTOTAL of Unitemized Independent Expenditures		. ▶	
	(c) TOTAL Independent Expenditures			
	(c) TOTAL Independent Expenditures		•	
	Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.			
	MR. JON FRANCIS [Electron	nically Filed] Date	M 0	1 31 2016

MR. JON FRANCIS

Signature

SCHEDULE E (FEC Form 3X)				
TEMIZED INDEPENDENT EXPENDITURE	S			PAGE 65 OF 93 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				
KEEP THE PROMISE III			FE	C IDENTIFICATION NUMBER ▼
				C00575423
Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed on	/ D = D / Y = Y = Y
Full Name of Payee FACEBOOK			Date of P	Public Distribution/Dissemination
[MEMO ITEM]			12	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1 HACKER WAY			Amount	
City	State	Zip Code	<u> </u>	5683.93
MENLO PARK	CA	94025		on ID : SE.132 Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA PRODUCTION/PLACEMENT		Category/ Type 001	12	27 / 2015
Name of Federal Candidate		X Support	Office Sought:	House District: 00
RAFAEL 'TED' EDWARD CRUZ		Oppose	President	Senate State: IA
Calendar Year-To-Date Per Election for Office Sought	, , ,	170657.74	Disbursement For 2016 Other	or:
Full Name of Payee			Date of F	Public Distribution/Dissemination
FACEBOOK [MEMO ITEM]			12	
Mailing Address 1 HACKER WAY				27 2010
I Work with			Amount	
City	State	Zip Code		277.26
MENLO PARK	CA	94025		on ID : SE.134 Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA PRODUCTION/PLACEMENT		Category/ Type 001	M 12	
Name of Federal Candidate		Support	Office Sought:	House District: 00
RAFAEL 'TED' EDWARD CRUZ		Oppose	X President	Senate State: IA
Calendar Year-To-Date		470005 50	Disbursement Fo	
Per Election for Office Sought	, ,	173835.52	2016 Othe	r (specify) •
(a) SUBTOTAL of Itemized Independent Expendit	ures		· •	0.00
(b) SUBTOTAL of Unitemized Independent Expen	ditures		·	7 1 7 1 7
(c) TOTAL Independent Expenditures			•	7 1 7 1 7
Under penalty of perjury I certify that the indepen with, or at the request or suggestion of, any candi party committee) any political party committee or i	date or authorized	•		

[Electronically Filed]

2016

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MR. JON FRANCIS

Signature

SCHEDULE E (FEC Form 3X)					
ITEMIZED INDEPENDENT EXPENDITURES				PAGE 66	OF 93 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			-		
KEEP THE PROMISE III				EC IDENTIFICATION	JN NUMBER ▼
				C00575423	
Check if 24-hour report 48-hour report	New report	Amends repo	rt filed on	M / D D /	Y Y Y Y
Full Name of Payee FACEBOOK			Date of	Public Distribution	Dissemination
[MEMO ITEM]			M 1:		2015
Mailing Address 1 HACKER WAY			Amount		
City St	ate Z	ip Code			5229.13
		94025		on ID : SE.135 Disbursement or (Obligation
Purpose of Expenditure DIGITAL MEDIA PRODUCTION/PLACEMENT		Category/ Type 001	M 12	2 28	2015
Name of Federal Candidate		X Support	Office Sought:	House	District: 00
RAFAEL 'TED' EDWARD CRUZ		Oppose	X President		State:IA
Calendar Year-To-Date Per Election for Office Sought		179064.65	Disbursement F 2016 Othe	For: X Primary er (specify) ►	General
Full Name of Payee			Date of	Public Distribution	/Dissemination
FACEBOOK [MEMO ITEM]			M 1		2015
Mailing Address 1 HACKER WAY			Amount		
City	tate Z	ip Code			5248.27
l i		94025		ion ID : SE.137 Disbursement or (
Purpose of Expenditure DIGITAL MEDIA PRODUCTION/PLACEMENT		Category/ Type 001	М		2015
Name of Federal Candidate		V Cunnart	Office Cought	Llevee	District: 00
RAFAEL 'TED' EDWARD CRUZ		Support Oppose	Office Sought:	House	District.
		Орроѕе	X Presiden		State.
Calendar Year-To-Date Per Election for Office Sought		187452.54	Disbursement I 2016 Oth	For: X Primary er (specify) ►	/ General
(a) SUBTOTAL of Itemized Independent Expenditures			>	7 7	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures	3		•	4	
(c) TOTAL Independent Expenditures			·	7 1 1 7	
Under penalty of perjury I certify that the independent exwith, or at the request or suggestion of, any candidate coparty committee) any political party committee or its age	or authorized c	•			·

[Electronically Filed]

2016

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SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

	PAGE 67 FOR LINE	OF 93 24 OF FORM 3X
EC ID	_	ION NUMBER ▼
C	C00575423	
M /	D D /	Y - Y - Y - Y
Public	Distribution	n/Dissemination
2 /	30	2015
		5302.75
	: SE.139 irsement or	111211
	irsement or	111211
Disbu	irsement or	Obligation
Disbu	arsement or	Obligation Y Y Y Y Y Y Y Y 2015
Disbu 2	House	Obligation 2015 District: 00 State: IA
Disbu	House Senate	Obligation 2015 District: 00 State: IA
Disbu 2 / t =or:	House Senate Primare	Obligation 2015 District: 00 State: IA

	FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
KEEP THE PROMISE III	C C00575423
Check if 24-hour report 48-hour report New report Amends report filed	on M M / D D / Y Y Y Y Y
Full Name of Payee	Date of Public Distribution/Dissemination
FACEBOOK [MEMO ITEM]	12 30 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1 HACKER WAY	Amount
City State Zip Code	5302.75
MENLO PARK CA 94025	Transaction ID : SE.139 Date of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA PRODUCTION/PLACEMENT Category/ Type 001	12 30 / Y 3 Y 3 Y 3 Y 3 Y 3 Y 3 Y 3 Y 3 Y 3 Y
Name of Federal Candidate Support Office	e Sought: House District: 00
RAFAEL 'TED' EDWARD CRUZ Oppose	President Senate State: IA
Calendar Year-To-Date Per Election for Office Sought Disbut 195901.85	ursement For:
Full Name of Payee	Date of Public Distribution/Dissemination
FACEBOOK [MEMO ITEM]	12 31 2015
Mailing Address 1 HACKER WAY	Amount
City State Zip Code	3540.89
MENLO PARK CA 94025	Transaction ID : SE.143 Date of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA PRODUCTION/PLACEMENT Category/ Type 001	12 / 31 / 2015
Name of Federal Candidate Support Office	e Sought: House District: 00
RAFAEL 'TED' EDWARD CRUZ	President Senate State: IA
Calendar Year-To-Date Per Election for Office Sought Disbut 202515.29	ursement For:
(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not mouth, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
MR. JON FRANCIS [Electronically Filed] Date	11 31 2016
Signature	

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

PAGE	68	OF	93 ORM 3X
FOR L	INE 24	OF F	ORM 3X

	FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
KEEP THE PROMISE III	C C00575423
Check if 24-hour report 48-hour report New report Amends report filed	i on Man / Dad / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
RAPID RESPONSE TELEVISION LLC [MEMO ITEM] [MEMO ITEM]	10 27 2015
Mailing Address PO BOX 36819	Amount
City State Zip Code	600.00
CANTON OH 44735	Transaction ID : SE.64 Date of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA PRODUCTION/PLACEMENT Category/ Type 001	10 27 2015
Name of Federal Candidate Support Office	e Sought: House District: 00
RAFAEL 'TED' EDWARD CRUZ Oppose	President Senate State: IA
Calendar Year-To-Date Per Election for Office Sought Disbute 2016	
5 11 11 12	Other (specify) ▶
Full Name of Payee RAPID RESPONSE TELEVISION LLC [MEMO ITEM] [MEMO ITEM]	Date of Public Distribution/Dissemination 10 27 2015
Mailing Address PO BOX 36819	Amount
	200.00
City State Zip Code CANTON OH 44735	Transaction ID : SE.65
Purpose of Expenditure DIGITAL MEDIA PRODUCTION/PLACEMENT Category/ Type 001	Date of Disbursement or Obligation 10 27 2015
News of Endand Condition	
Support Oilid	e Sought: House District: 00 President Senate State: IA
Calendar Year-To-Date Disb	ursement For: X Primary General
Per Election for Office Sought	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not m with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
MR. JON FRANCIS [Electronically Filed] Date	01 / 31 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	

MIZED INDEPENDENT EXPENDITURES				PAGE 69 OF 93 FOR LINE 24 OF FORM 3X
ME OF COMMITTEE (In Full)			FEC	DIDENTIFICATION NUMBER ▼
EEP THE PROMISE III			C	C00575423
eck if 24-hour report 48-hour report	New repo	ort Amends repo	rt filed on	/ D = D / Y = Y = Y
Full Name of Payee RAPID RESPONSE TELEVISION LLC [ME	MO ITEM]		Date of Pu	ublic Distribution/Dissemination
[MEMO ITEM] Mailing Address PO BOX 36819			10 Amount	28 2015
City S	State	Zip Code		2500.00
CANTON	ОН	44735		n ID : SE.66 isbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA PRODUCTION/PLACEMENT		Category/ Type 001	10	28 / 2015
Name of Federal Candidate		Support	Office Sought:	House District: 00
RAFAEL 'TED' EDWARD CRUZ		Oppose	X President	Senate State: IA
Calendar Year-To-Date Per Election for Office Sought		3630.06	Disbursement Fo 2016 Other	r:
Full Name of Payee RAPID RESPONSE TELEVISION LLC [MEMO ITEM]	[MEMO I	TEM]	Date of P	ublic Distribution/Dissemination / 28 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 36819			Amount	
City	State	Zip Code		600.00
CANTON	ОН	44735		n ID : SE.67 isbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA PRODUCTION/PLACEMENT		Category/ Type 001		/ 28 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate			Office Sought:	House District: 00
RAFAEL 'TED' EDWARD CRUZ		Oppose	X President	Senate State: IA
Calendar Year-To-Date Per Election for Office Sought		4230.06	Disbursement Fo	r:
a) SUBTOTAL of Itemized Independent Expenditures.				0.00

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

(c) TOTAL Independent Expenditures.....

	Electronically Filed] Date 01 31	2016	
Signature			

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HEDULE E (FEC Form 3X) MIZED INDEPENDENT EXPENDITURES		PAGE FOR LI	70 INE 24		93 ORM 3X
ME OF COMMITTEE (In Full)	FEC I	DENTIFIC	CATIO	N NUM	BER ▼
EP THE PROMISE III					

NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
KEEP THE PROMISE III		C C00575423
Check if 24-hour report 48-hour report New report	Amends report filed	i on Man / Dab / Yayaya
Full Name of Payee		Date of Public Distribution/Dissemination
RAPID RESPONSE TELEVISION LLC [MEMO ITEM] [MEMO ITEM]		10 28 2015
Mailing Address PO BOX 36819		Amount
City State Zip Co	ode	300.00
CANTON OH 44735		Transaction ID : SE.68 Date of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA PRODUCTION/PLACEMENT Cate	gory/ Type 001	10 28 2015
Name of Federal Candidate	X Support Office	e Sought: House District: 00
RAFAEL 'TED' EDWARD CRUZ	Oppose X	
Calendar Year-To-Date Per Election for Office Sought 45	Disb 030.06 2016	
Full Name of Payer		Other (specify)
Full Name of Payee RAPID RESPONSE TELEVISION LLC [MEMO ITEM]		Date of Public Distribution/Dissemination 10 29 2015
Mailing Address PO BOX 36819		Amount
City State Zip Co	nde	300.00
CANTON OH 44738		Transaction ID : SE.70 Date of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA PLACEMENT/PRODUCTION Cate	gory/ Type 001	10 29 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	X Support Offic	e Sought: House District: 00
RAFAEL 'TED' EDWARD CRUZ		President Senate State: IA
Calendar Year-To-Date Per Election for Office Sought	Disb 2016	
		Other (specify) -
(a) SUBTOTAL of Itemized Independent Expenditures	·····	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures	·····	
(c) TOTAL Independent Expenditures		
		4 4
Under penalty of perjury I certify that the independent expenditures reporte with, or at the request or suggestion of, any candidate or authorized commparty committee) any political party committee or its agent.		
MR. JON FRANCIS [Electronically F	iled] Date (01 31 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	Date	

	age# 201601319005238154	v \					
	CHEDULE E (FEC Form 3 EMIZED INDEPENDENT EXPENI					PAGE 71	OF 93 24 OF FORM 3X
NΑ	ME OF COMMITTEE (In Full)				550		
	EEP THE PROMISE III					IDENTIFICAT	TION NUMBER ▼
					C	C00575423	
Ch	eck if 24-hour report 48-hour	report New repo	ort Amends repo	ort filed or	n M m	/ D = D	Y
	Full Name of Payee RAPID RESPONSE TELEVISION		1	С			n/Dissemination
	[MEMO ITEM]	511 220 [M2M0 112M]			10 ^M	29	2015
	Mailing Address PO BOX 36819			Д	Amount		
	City	State	Zip Code			ID 05.74	600.00
	CANTON	ОН	44735		ansaction Date of Dis	bursement or	Obligation
	Purpose of Expenditure DIGITAL MEDIA PLACEMENT/PRODUC	CTION	Category/ Type 001		10	/ 29	2015
	Name of Federal Candidate		Support	Office S	ought:	House	District: 00
	RAFAEL 'TED' EDWARD CRUZ		Oppose		resident	Senate	State: IA
	Calendar Year-To-Date Per Election for Office Sought		5636.36	Disburse 2016	ement For: Other (Primar specify) ▶	ry General
	Full Name of Payee STRIPES AGENCY LLC [MI	EMO ITEM]			Date of Pul	olic Distributio	n/Dissemination / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 400 NORTH ST PAUL	#1025		A	Amount		
	City	State	Zip Code				230.06
	DALLAS	TX	75201	I		ID : SE.63 bursement or	Obligation
	Purpose of Expenditure DIGITAL MEDIA PRODUCTION/PLACE	MENT	Category/ Type 001		10	/ 19	2015
	Name of Federal Candidate		Support	Office S	Sought:	House	District: 00
	RAFAEL 'TED' EDWARD CRUZ		Oppose		resident	Senate	State: IA
	Calendar Year-To-Date Per Election for Office Sought		230.06	Disburse 2016	ement For:		ry General
	<u> </u>				Other (specify)	
	(a) SUBTOTAL of Itemized Independent	Expenditures				F 1 1 7F	0.00
	(b) SUBTOTAL of Unitemized Independent	ent Expenditures					1 75 1
	(c) TOTAL Independent Expenditures					7- 1-7-	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

MR. JON FRANCIS	[Electronically Filed]	Date	M M /	31	/	2016
Signature		Date	-			

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MIZED INDEPENDENT EXPEN	DITURES			PAGE 72 OF 93 FOR LINE 24 OF FORM 3X
ME OF COMMITTEE (In Full)			EEC I	DENTIFICATION NUMBER ▼
EEP THE PROMISE III			FECT	
			C	C00575423
eck if 24-hour report 48-hour	report New	report Amends repo	ort filed on	/ D = D / Y = Y = Y
Full Name of Payee			Date of Publ	ic Distribution/Dissemination
STRIPES AGENCY LLC [MEM	O ITEM]		M M	/ D D / Y Y Y Y Y
[MEMO ITEM] Mailing Address			10	28 2015
400 NORTH ST PAUL	#1025		Amount	
City	State	Zip Code		206.30
DALLAS	TX	75201	Transaction I Date of Disb	D: SE.69 ursement or Obligation
Purpose of Expenditure DIGITAL MEDIA PRODUCTION/PLACE	MENT	Category/ Type 001	10	28 2015
Name of Federal Candidate		Support	Office Sought:	House District: 00
RAFAEL 'TED' EDWARD CRUZ		Oppose		Senate State: IA
Calendar Year-To-Date Per Election for Office Sought		4736.36	Disbursement For: 2016 Other (s	Primary General
Full Name of Payee STRIPES AGENCY LLC [M [MEMO ITEM] Mailing Address 400 NORTH ST PAUL			Date of Publ	ic Distribution/Dissemination / DDD / YDD / 2015
City	State	Zip Code		253.70
DALLAS	TX	75201	Transaction I Date of Dish	D: SE.72 oursement or Obligation
Purpose of Expenditure DIGITAL MEDIAL PRODUCTION/PLAC	EMENT	Category/ Type 001	M 11	14 2015
Name of Federal Candidate		Support	Office Sought:	House District: 00
RAFAEL 'TED' EDWARD CRUZ		Oppose	President	Senate State: IA
Calendar Year-To-Date Per Election for Office Sought		5890.06	Disbursement For: 2016 Other (s	Primary General
(a) SUBTOTAL of Itemized Independent	Expenditures		•	0.00
b) SUBTOTAL of Unitemized Independent	ent Expenditures		•	

Under with, or party committee) any political party committee or its agent.

MR. JON FRANCIS	[Electronically Filed]		01	31	2016
Signature					

PAGE 73 OF 93 FOR LINE 24 OF FORM 3X
EC IDENTIFICATION NUMBER ▼
C00575423
M / D = D / Y = Y = Y
Public Distribution/Dissemination
M / D D / Y Y Y Y Y 15 15 2015
313.06 on ID : SE.73 Disbursement or Obligation
15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
House District:00
Senate State:IA
For: Primary General
er (specify) -
Public Distribution/Dissemination
M / D D / Y Y Y Y

NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
KEEP THE PROMISE III	C C00575423
Check if 24-hour report 48-hour report New report Amends report filed of	on M = M / D = D / Y = Y = Y
Full Name of Payee	Date of Public Distribution/Dissemination
STRIPES AGENCY LLC [MEMO ITEM] [MEMO ITEM]	11 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 400 NORTH ST PAUL #1025	Amount
City State Zip Code	313.06
	ransaction ID : SE.73 Date of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA PRODUCTION/PLACEMENT Category/ Type 001	11 15 / 2015
Name of Federal Candidate Support Office	Sought: House District:00
PAEAEL ITED: EDWARD CRUZ	President Senate State: IA
Calendar Year-To-Date Per Election for Office Sought Disbur 2016	sement For: Primary General
	Other (specify) ▶
Full Name of Payee STRIPES AGENCY LLC [MEMO ITEM] [MEMO ITEM]	Date of Public Distribution/Dissemination 11 16 2015
Mailing Address 400 NORTH ST PAUL #1025	Amount
City Code	203.84
City State Zip Code DALLAS TX 75201	Transaction ID : SE.74
Purpose of Expenditure DIGITAL MEDIA PRODUCTION/PLACEMENT Category/ Type 001	Date of Disbursement or Obligation 11 16 2015
Name of Federal Candidate Support Office	Sought: House District: 00
DAFAEL ITED! EDWARD ODLIZ	President Senate State: IA
Calendar Year-To-Date Per Election for Office Sought Disbur 2016	rsement For: Primary General
(a) SUBTOTAL of Itemized Independent Expenditures	Other (specify)
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not mad with, or at the request or suggestion of, any candidate or authorized committee or agent of either, party committee) any political party committee or its agent.	
MR. JON FRANCIS [Electronically Filed] Data 01	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature Date 01	31 2010

NAME OF COMMITTEE (In Full) KEEP THE PROMISE III

Full Name of Payee

Purpose of Expenditure

Full Name of Payee

Purpose of Expenditure

Name of Federal Candidate

RAFAEL 'TED' EDWARD CRUZ

Calendar Year-To-Date

Per Election for Office Sought

[MEMO ITEM] Mailing Address

City

DALLAS

Signature

Name of Federal Candidate

RAFAEL 'TED' EDWARD CRUZ

Calendar Year-To-Date

Per Election for Office Sought

STRIPES AGENCY LLC [MEMO ITEM]

DIGITAL MEDIA PRODUCTION/PLACEMENT

400 NORTH ST PAUL #1025

(a) SUBTOTAL of Itemized Independent Expenditures.....

(b) SUBTOTAL of Unitemized Independent Expenditures

[MEMO ITEM] Mailing Address

24-hour report

Check if

City **DALLAS**

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

STRIPES AGENCY LLC [MEMO ITEM]

DIGITAL MEDIA PRODUCTION/PLACEMENT

400 NORTH ST PAUL #1025

48-hour report

New report

Zip Code

Category/

6634.21

Zip Code

Category/

9054.13

75201

75201

State

TX

State

 TX

	PAGE 74 OF 93 FOR LINE 24 OF FORM 3X
	FEC IDENTIFICATION NUMBER ▼
	C C00575423
Amends report filed	d on M M / D D / Y Y Y Y Y
	Date of Public Distribution/Dissemination
	11 17 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Amount
ode	227.25
	Transaction ID : SE.75 Date of Disbursement or Obligation
gory/ Type 001	11 17 2015
Support Offic	e Sought: House District:00
Oppose	President Senate State: IA
Disb 2016	ursement For:
'	Date of Public Distribution/Dissemination
	11 18 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Amount
ode	2419.92
I	Transaction ID : SE.76 Date of Disbursement or Obligation
	M = M / D = D / Y = Y = Y
	11 18 2015
Type 001	11 18 2015 ee Sought: House District: 00
Type 001	11 18 2015
Support Office Oppose	te Sought: House District: 00 President Senate State: IA Primary General
Support Office Oppose Disb	11 18 2015 The Sought: House District: 00 President Senate State: IA Dursement For: Primary General General

(c) TOTAL Independent Expenditures..... Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. MR. JON FRANCIS [Electronically Filed]

2016

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01

Date

	PAGE 75 OF 93 FOR LINE 24 OF FORM 3X
C	DENTIFICATION NUMBER ▼
(C00575423
/	D D
ic	Distribution/Dissemination
/	19 / 2015

				TOTT LINE 24 OF TOTAL 3X
NAME OF COMMITTEE (In Full) KEEP THE PROMISE III				FEC IDENTIFICATION NUMBER ▼
VEEL THE LKOMISE III				C C00575423
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee	1		Date	e of Public Distribution/Dissemination
STRIPES AGENCY LLC [MEMO ITEM [MEMO ITEM] Mailing Address 400 NORTH OF BALL 1/4005]			11 19 / 2015
400 NORTH ST PAUL #1025			Amo	ount
City	State	Zip Code		784.68
DALLAS	TX	75201		saction ID : SE.77 e of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA PRODUCTION/PLACEMENT		Category/ Type 001		11 19 / 2015
Name of Federal Candidate		X Support	Office Sou	ght: House District: 00
RAFAEL 'TED' EDWARD CRUZ		Oppose	X Pres	ident Senate State: IA
Calendar Year-To-Date Per Election for Office Sought		9838.81	Disburseme 2016	
	, , ,			Other (specify) -
Full Name of Payee STRIPES AGENCY LLC [MEMO IT	т=M1		Dat	e of Public Distribution/Dissemination
[MEMO ITEM] Mailing Address AND NORTH OF BALL (14995)				11 20 2015
400 NORTH ST PAUL #1025			Am	ount
City	State	Zip Code		165.09
DALLAS	TX	75201		saction ID : SE.78 e of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA PRODUCTION/PLACEMENT		Category/ Type 001		11 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate		Support	Office Sou	ght: House District: 00
RAFAEL 'TED' EDWARD CRUZ		Oppose	X Pres	ident Senate State: IA
Calendar Year-To-Date Per Election for Office Sought		10003.90	Disbursem 2016	
	,			Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditu	ures		• •	0.00
(b) SUBTOTAL of Unitemized Independent Expen	ditures		. •	
(c) TOTAL Independent Expenditures			•	7 7 7
Under penalty of perjury I certify that the indepen with, or at the request or suggestion of, any candi party committee) any political party committee or it	date or authorized	•		· · · · · · · · · · · · · · · · · · ·
MR. JON FRANCIS	[Electron	ically Filed]	M M M M M M M M M M M M M M M M M M M	/ 31 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	-	Date	, ,,,	2010

NAME OF COMMITTEE (In Full) KEEP THE PROMISE III

PAGE 76 OF 93 FOR LINE 24 OF FORM 3X					
FEC IDENTIFICATION NUMBER ▼					
C C00575423					
- M / D - D / Y - Y - Y - Y					
of Public Distribution/Dissemination					
11 / 20 / 2015					
nt					
651.22					
ction ID : SE.79 of Disbursement or Obligation					
11 20 / 2015					
it: House District: 00					
ent Senate State: IA					
t For: Primary General					
of Public Distribution/Dissemination					
11 20 2015					
int					
613.22					
oction ID : SE.80 of Disbursement or Obligation					
11 20 2015					
nt: House District:00					
ent Senate State: IA					
nt For: X Primary General					
Other (specify)					
0.00					

				G 00073423		
Check if 24-hour report 48-hour report New report Amends report filed on						
Full Name of Payee				Date of Public Distribution/Dissemination		
STRIPES AĞENCY LLC [MEMO ITEM] [MEMO ITEM]				11 20 7 2015		
Mailing Address 400 NORTH ST PAUL #1025				Amount		
City	ite	Zip Code		651.22		
DALLAS TX	(75201		Transaction ID : SE.79 Date of Disbursement or Obligation		
Purpose of Expenditure MEDIA		Category/ Type 001		11 20 / Y 2015		
Name of Federal Candidate		X Support	Office	e Sought: House District: 00		
RAFAEL 'TED' EDWARD CRUZ		Oppose	X	President Senate State: IA		
Calendar Year-To-Date Per Election for Office Sought		10655.12	Disbu 2016			
Full Name of Davis				Other (specify)		
Full Name of Payee STRIPES AGENCY LLC [MEMO ITEM]				Date of Public Distribution/Dissemination		
[MEMO ITEM]				11 20 2015		
Mailing Address 400 NORTH ST PAUL #1025				Amount		
City Sta	ate	Zip Code		613.22		
DALLAS T.		75201		Transaction ID : SE.80 Date of Disbursement or Obligation		
Purpose of Expenditure DIGITAL MEDIA PRODUCTION/PLACEMENT		Category/ Type 001		11 20 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Name of Federal Candidate	'	X Support	Office	e Sought: House District: 00		
RAFAEL 'TED' EDWARD CRUZ		Oppose	X	President Senate State: IA		
Calendar Year-To-Date Per Election for Office Sought	1 1 0	11268.34	Disbi 2016	ursement For:		
,	,					
(a) SUBTOTAL of Itemized Independent Expenditures			·· •	0.00		
(b) SUBTOTAL of Unitemized Independent Expenditures			·· •	1 1 7 1 1 7 1 1 7 1		
(c) TOTAL Independent Expenditures			·· •			
Under penalty of perjury I certify that the independent exwith, or at the request or suggestion of, any candidate or party committee) any political party committee or its agen	authorized	•		• • •		
MR. JON FRANCIS	[Electronic	cally Filed] Date	_ M_0	1 31 2016		
Signature				التتنا لنا ك		

PAGE	77	OF	93 DRM 3X
FOR L	INE 24	OF FO	ORM 3X

	FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
KEEP THE PROMISE III	C C00575423
Check if 24-hour report 48-hour report New report Amends report filed	on Mam / Dab / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
STRIPES AGENCY LLC [MEMO ITEM] [MEMO ITEM]	11 21 2015
Mailing Address 400 NORTH ST PAUL #1025	Amount
	, and an
City State Zip Code	22.51
DALLAS TX 75201	Transaction ID : SE.81 Date of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA PRODUCTION/PLACEMENT Category/ Type 001	11 21 2015
Name of Federal Candidate Support Office	Sought: House District: 00
RAFAEL 'TED' EDWARD CRUZ	President Senate State: IA
44000.05	rsement For: X Primary General
Per Election for Office Sought 11290.85 2016	Other (specify)
Full Name of Payee STRIPES AGENCY LLC [MEMO ITEM]	Date of Public Distribution/Dissemination
_[MEMO ITEM]	11 21 2015
Mailing Address 400 NORTH ST PAUL #1025	Amount
City State Zip Code	1400.13
DALLAS TX 75201	Transaction ID : SE.82 Date of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA PRODUCTION/PLACEMENT Category/ Type 001	11 21 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office	Sought: House District:00
DAFAEL ITED FOWADD ODLIZ	President Senate State: IA
	ırsement For: X Primary General
(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
MR. JON FRANCIS [Electronically Filed] Date	1 31 2016
Signature	

PAGE	_		OF		93	
FOR	LINE	24	OF	FOF	RM	ЗХ

	FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
KEEP THE PROMISE III	C C00575423
Check if 24-hour report 48-hour report New report Amends report filed	d on Man / Dad / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
STRIPES AGENCY LLC [MEMO ITEM] [MEMO ITEM]	11 22 2015
Mailing Address 400 NORTH ST PAUL #1025	Amount
City State Zip Code	1470.95
DALLAS TX 75201	Transaction ID : SE.83 Date of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA PRODUCTION/PLACEMENT Category/ Type 001	11 22 2015
Name of Federal Candidate Support Office	e Sought: House District: 00
DAFAEL ITEDI EDWADD ODLIZ	President Senate State: IA
Calendar Year-To-Date Per Election for Office Sought Disbute 14161.93	
	U Other (specify) ►
Full Name of Payee STRIPES AGENCY LLC [MEMO ITEM]	Date of Public Distribution/Dissemination
[MEMO ITEM] Mailing Address 400 NORTH ST PAUL #1025	11 23 2015
400 NONTH 01 1 AGE # 1023	Amount
City State Zip Code	1408.61
DALLAS TX 75201	Transaction ID : SE.84 Date of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA PRODUCTION/PLACEMENT Category/ Type 001	11 D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Offic	e Sought: House District: 00
RAFAEL 'TED' EDWARD CRUZ Oppose	President Senate State: IA
Calendar Year-To-Date Per Election for Office Sought Disb 2016	ursement For:
(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not m with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
MR. JON FRANCIS [Electronically Filed] Date	01 / 31 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	

MR. JON FRANCIS

Signature

	CHEDULE E (FEC Form 3X EMIZED INDEPENDENT EXPENDE				PAGE 79 OF 93
					FOR LINE 24 OF FORM 3X
	AME OF COMMITTEE (In Full) EEP THE PROMISE III			FEC	IDENTIFICATION NUMBER ▼
r	REEP THE PROMISE III			С	C00575423
Cł	neck if 24-hour report 48-hour re	port New re	port Amends repo	ort filed on	/ D = D / Y = Y = Y
	Full Name of Payee			Date of Pu	blic Distribution/Dissemination
	STRIPES AGENCY LLC [MEMO	IIEMJ		M = M	/ D D / Y Y Y Y Y 24 2015
	[MEMO ITEM] Mailing Address 400 NORTH ST PAUL #1	025			24 2010
	400 NORTH 31 FAUL#	023		Amount	
	City	State	Zip Code		1457.43
	DALLAS	TX	75201	Transaction Date of Dis	ID: SE.85 sbursement or Obligation
	Purpose of Expenditure DIGITAL MEDIA PRODUCTION/PLACEME	INIT	Category/	M	/ D D / Y Y Y Y Y
	DIGITAL WEDIA PRODUCTION/PLACEWI	-141	Type 001	11	24 2015
	Name of Federal Candidate		X Support	Office Sought:	House District: 00
	RAFAEL 'TED' EDWARD CRUZ		Oppose	X President	Senate State: IA
	Calendar Year-To-Date Per Election for Office Sought		17027.97	Disbursement For 2016	
				Other	(specify) ►
	Full Name of Payee STRIPES AGENCY LLC [MEI	√O ITEMI		Date of Pu	ablic Distribution/Dissemination
	[MEMO ITEM]	NO ITEM]		11	25 2015
	Mailing Address 400 NORTH ST PAUL #1	025		Amount	
	City	State	Zip Code		1458.91
	DALLAS	TX	75201	Transaction	
	Purpose of Expenditure		Catagony	Date of Di	sbursement or Obligation
	DIGITAL MEDIA PRODUCTION/PLACEM	ENT	Category/ Type 001	11	25 2015
	Name of Federal Candidate		X Support	Office Sought:	House District: 00
	RAFAEL 'TED' EDWARD CRUZ		Oppose	President	Senate State: IA
	Calendar Year-To-Date			Disbursement For	: X Primary General
	Per Election for Office Sought		18486.88	2016 Other	(specify) ►
_					(0000)
	(a) SUBTOTAL of Itemized Independent Ex	rpenditures			0.00
					7 7
	(b) SUBTOTAL of Unitemized Independent	Expenditures		·· •	g 1 4 1 4 1
	(a) TOTAL Independent Francisco				
	(c) TOTAL Independent Expenditures			·· •	7 7
	Under penalty of perjury I certify that the i	ndependent expenditure	s reported herein were	not made in coope	eration consultation or concert
	with, or at the request or suggestion of, an party committee) any political party committee	y candidate or authorize			

[Electronically Filed]

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Date

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MR. JON FRANCIS

Signature

	CHEDULE E (FEC Form 3X)							
	EMIZED INDEPENDENT EXPENDITURES	PAGE 80 OF 93 FOR LINE 24 OF FORM 3X						
	AME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼						
k	KEEP THE PROMISE III	C C00575423						
Ch	heck if 24-hour report 48-hour report New report Amends report file	filed on/ D D / Y Y Y Y Y						
	Full Name of Payee STRIPES AGENCY LLC [MEMO ITEM] [MEMO ITEM] Mailing Address	Date of Public Distribution/Dissemination 11 26 2015						
	400 NORTH ST PAUL #1025	Amount						
	City State Zip Code	1422.75						
	DALLAS TX 75201	Transaction ID : SE.87 Date of Disbursement or Obligation						
	Purpose of Expenditure DIGITAL MEDIA PRODUCTION/PLACEMENT Category/ Type 001	11 26 / Y Y Y Y Y Y						
	Name of Federal Candidate Support Of	office Sought: House District: 00						
		President Senate State: IA						
		isbursement For:						
	Full Name of Payee STRIPES AGENCY LLC [MEMO ITEM] [MEMO ITEM] Mailing Address 400 NORTH ST PAUL #1025	Date of Public Distribution/Dissemination 11 27 27 2015						
	City State Zip Code	Amount 545.33						
	DALLAS TX 75201	Transaction ID : SE.88 Date of Disbursement or Obligation						
	Purpose of Expenditure DIGITAL MEDIA PRODUCTION/PLACEMENT Category/ Type 001	11 27 2015						
	Name of Federal Candidate Support Of	Office Sought: House District:00						
	DAFAEL ITED EDWARD COUZ	President Senate State: IA						
		Oisbursement For: Primary General Other (specify)						
	(a) SUBTOTAL of Itemized Independent Expenditures	0.00						
	C. Ciproti - Cibitania di Indonesia Empeditura							
	(b) SUBTOTAL of Unitemized Independent Expenditures	, , , , , , , , , , , , , , , , , , , ,						
	(c) TOTAL Independent Expenditures							
	Under penalty of perjury I certify that the independent expenditures reported herein were not with, or at the request or suggestion of, any candidate or authorized committee or agent of eit party committee) any political party committee or its agent.							

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Date

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SCHEDULE E (FEC Form 3X)							
TEMIZED INDEPENDENT EXPENDITURES	PAGE 81 OF 93 FOR LINE 24 OF FORM 3X						
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼						
KEEP THE PROMISE III	C C00575423						
Check if 24-hour report 48-hour report New report Amends re	eport filed on						
Full Name of Payee STRIPES AGENCY LLC [MEMO ITEM]	Date of Public Distribution/Dissemination 11 28 2015						
[MEMO ITEM] Mailing Address 400 NORTH ST PAUL #1025	Amount						
City State Zip Code	0.34						
DALLAS TX 75201	Transaction ID : SE.89 Date of Disbursement or Obligation						
Purpose of Expenditure DIGITAL MEDIA PRODUCTION/PLACEMENT Category/ Type 00	01 11 28 2015						
Name of Federal Candidate Support							
RAFAEL 'TED' EDWARD CRUZ Oppose	President Senate State:IA						
Calendar Year-To-Date Per Election for Office Sought	Disbursement For:						
Full Name of Payee YOUTUBE [MEMO ITEM]	Date of Public Distribution/Dissemination 12 08 2015						
Mailing Address 901 CHERRY AVE	Amount						
City State Zip Code	303.02						
SAN BRUNO CA 94066	Transaction ID : SE.92 Date of Disbursement or Obligation						
Purpose of Expenditure DIGITAL MEDIA PRODUCTION/PLACEMENT Category/ Type 00	11 12 / 08 / 2015						
Name of Federal Candidate Support							
RAFAEL 'TED' EDWARD CRUZ Oppose							
Calendar Year-To-Date Per Election for Office Sought 26049.04	Disbursement For:						
(a) SUBTOTAL of Itemized Independent Expenditures	0.00						
(b) SUBTOTAL of Unitemized Independent Expenditures	····· >						
(c) TOTAL Independent Expenditures							
Under penalty of perjury I certify that the independent expenditures reported herein wer with, or at the request or suggestion of, any candidate or authorized committee or agent party committee) any political party committee or its agent.							
MR. JON FRANCIS	M M / D D / Y Y Y						

[Electronically Filed]

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Date

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SCHEDULE E (FEC Form 3X)			
TEMIZED INDEPENDENT EXPENDIT	JRES		PAGE 82 OF 93 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
KEEP THE PROMISE III			C C00575423
Check if 24-hour report 48-hour report	nrt New rep	port Amends repo	ort filed on M M / D D / Y Y Y Y Y
Full Name of Payee YOUTUBE			Date of Public Distribution/Dissemination
[MEMO ITEM]			12 09 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 901 CHERRY AVE			Amount
City	State	Zip Code	809.19
SAN BRUNO	CA	94066	Transaction ID : SE.94 Date of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA PRODUCTION/PLACEMEN	Т	Category/ Type 001	12 / 09 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate		X Support	Office Sought: House District: 00
RAFAEL 'TED' EDWARD CRUZ		Oppose	President Senate State: IA
Calendar Year-To-Date Per Election for Office Sought		33700.90	Disbursement For:
Full Name of Payee YOUTUBE [MEMO ITEM]			Date of Public Distribution/Dissemination
Mailing Address 901 CHERRY AVE			Amount
City	State	Zip Code	6647.84
SAN BRUNO	CA	94066	Transaction ID : SE.96 Date of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA PRODUCTION/PLACEMEN	ΙΤ	Category/ Type 001	12 / 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate			Office Sought: House District: 00
RAFAEL 'TED' EDWARD CRUZ		Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	7	48098.45	Disbursement For:
(a) SUBTOTAL of Itemized Independent Exp	enditures		▶ 0.00
(b) CUDTOTAL of Unitamized Independent E	vnondituros		
(b) SUBTOTAL of Uniternized Independent E	xperialitares		
(c) TOTAL Independent Expenditures			··· >
	candidate or authorize		not made in cooperation, consultation, or concert of either, or (if the reporting entity is not a political

MR. JON FRANCIS	[Electronically Filed]	Date	01 /	31	2016
Signature					

	CHEDULE E (FEC Form 3X) EMIZED INDEPENDENT EXPENDITUR	RES				PAGE 83	OF 93
N.I.	AME OF COMMITTEE (b. F.II)					FOR LINE 24	4 OF FORM 3X
	AME OF COMMITTEE (In Full) KEEP THE PROMISE III				FEC I	IDENTIFICATIO	N NUMBER ▼
•	CEEF THE FROM DE III				C	C00575423	
CI	neck if 24-hour report 48-hour report	New rep	oort Amends repo	ort filed on	M = M	/ D = D /	Y Y Y Y Y
	Full Name of Payee			D	ate of Publ	lic Distribution/[Dissemination
	YOUTUBE				M M	/ D D /	2015
	[MEMO ITEM] Mailing Address				12	11	2015
	901 CHERRY AVE			А	mount		
	City	State	Zip Code				8566.66
	SAN BRUNO	CA	94066		ansaction I ate of Disb	D: SE.98 oursement or O	bligation
	Purpose of Expenditure DIGITAL MEDIA PRODUCTION/PLACEMENT		Category/ Type 001		12	11 /	2015
	Name of Federal Candidate		Support	Office So	ought:	House [District: 00
	RAFAEL 'TED' EDWARD CRUZ		Oppose		esident	Senate	State: IA
	Calendar Year-To-Date Per Election for Office Sought		64539.43	Disburse 2016	ement For:	Primary pecify) ▶	General
	E-II Name of Book	, , , , , , , , , , , , , , , , , , , ,					
	Full Name of Payee YOUTUBE				M = M	lic Distribution/l	Y Y Y Y Y
	[MEMO ITEM] Mailing Address				12	12	2015
	901 CHERRY AVE			A	mount		
	City	State	Zip Code				8567.83
	SAN BRUNO	CA	94066			ID: SE.100 oursement or O	bligation
	Purpose of Expenditure DIGITAL MEDIA PRODUCTION/PLACEMENT		Category/ Type 001		12	12	2015
	Name of Federal Candidate		Support	Office S	ought:	House [District:00
	RAFAEL 'TED' EDWARD CRUZ		Oppose	X Pr	resident	Senate	State:IA
	Calendar Year-To-Date Per Election for Office Sought		80996.54	Disburse 2016	ement For:	Primary	General
					Other (s	specify)	
	(a) SUBTOTAL of Itemized Independent Expendent	ditures		•		7	0.00
	(b) SUBTOTAL of Unitemized Independent Exp.	anditura a		F			
	(b) SOBTOTAL OF OTHER HIZER HIGEPERIOENT EXP	enditures		▶ [- 1 - 7	
	(c) TOTAL Independent Expenditures			•		- 7-	
	Under penalty of perjury I certify that the indep with, or at the request or suggestion of, any car party committee) any political party committee o	ndidate or authorized					
	MR. JON FRANCIS			М	/ D = 1	/ / / /	Y

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Date

TEMIZED INDEDENDENT EXPENDITIBLES	04 05 00
TEMIZED INDEPENDENT EXPENDITURES	PAGE 84 OF 93 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
KEEP THE PROMISE III	C C00575423
Check if 24-hour report 48-hour report New report Amends report filed on	A = M / D = D / Y = Y = Y
YOUTUBE	of Public Distribution/Dissemination 12 13 2015
City State Zip Code	8476.91
SAN BRUNO CA 94066 Transa	action ID : SE.102 of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA PRODUCTION/PLACEMENT Category/ Type 001	12 / 13 / 2015
Name of Federal Candidate Support Office Sough	nt: House District: 00
RAFAEL 'TED' EDWARD CRUZ Support Office Sough Preside	ii. District.
Calendar Year-To-Date Per Election for Office Sought Disbursement 2016	nt For:
YOUTURE _	of Public Distribution/Dissemination 12
*****	3440.08 action ID : SE.104
Purpose of Expenditure	of Disbursement or Obligation 12 16 2015
Name of Federal Candidate Support Office Sough	ht: House District:00
RAFAEL 'TED' EDWARD CRUZ Oppose Preside	lent Senate State: IA
Calendar Year-To-Date Per Election for Office Sought Disbursemer 2016 C	nt For:
(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures	17117117
(c) TOTAL Independent Expenditures	7 7 7
Under penalty of perjury I certify that the independent expenditures reported herein were not made in with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if party committee) any political party committee or its agent.	
MR. JON FRANCIS [Electronically Filed] Date 01	31 / 2016

TEMIZED INDEPENDENT EXPENDITURES	21.05 05 05 02
IEMIZED INDEPENDENT EXPENDITURES	PAGE 85 OF 93 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
KEEP THE PROMISE III	C C00575423
Check if 24-hour report 48-hour report New report Amends report	t filed on
Full Name of Payee YOUTUBE [MEMO ITEM] Mailing Address 901 CHERRY AVE	Date of Public Distribution/Dissemination 12 16 2015 Amount
City State Zip Code	4580.34
SAN BRUNO CA 94066	Transaction ID : SE.105 Date of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA PRODUCTION/PLACEMENT Category/ Type 001	12 / 16 / 2015
Name of Federal Candidate Support	Office Sought: House District: 00
RAFAEL 'TED' EDWARD CRUZ Oppose	President Senate State: IA
	Disbursement For:
Full Name of Payee YOUTUBE[MEMO ITEM] Mailing Address 901 CHERRY AVE	Date of Public Distribution/Dissemination 12 17 2015 Amount
City State Zip Code SAN BRUNO CA 94066	4242.99 Transaction ID : SE.106
Purpose of Expenditure DIGITAL MEDIA PRODUCTION/PLACEMENT Category/ Type 001	Date of Disbursement or Obligation 12 17 2015
Name of Federal Candidate Support	Office Sought: House District: 00
RAFAEL 'TED' EDWARD CRUZ Oppose	President Senate State: IA
	Disbursement For:
(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	•
Under penalty of perjury I certify that the independent expenditures reported herein were newith, or at the request or suggestion of, any candidate or authorized committee or agent of party committee) any political party committee or its agent.	
MR. JON FRANCIS [Electronically Filed] Date	01 / 31 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

TE	MIZED INDEPENDENT EXPENDITURE	ES			PAGE 86 OF 93 FOR LINE 24 OF FORM 3X
	ME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
K	EEP THE PROMISE III				C C00575423
Ch	eck if 24-hour report 48-hour report	New repo	ort Amends	s report	filed on M M / D D / Y Y Y Y Y Y
П	Full Name of Payee				Date of Public Distribution/Dissemination
	YOUTUBE _[MEMO ITEM]				12 18 2015
	Mailing Address 901 CHERRY AVE				Amount
	City	State	Zip Code		3994.76
	SAN BRUNO	CA	94066		Transaction ID : SE.107 Date of Disbursement or Obligation
	Purpose of Expenditure DIGITAL MEDIA PRODUCTION/PLACEMENT		Category/ Type	001	12 / 18 / 2015
	Name of Federal Candidate		X Supp	ort (Office Sought: House District:00
	RAFAEL 'TED' EDWARD CRUZ		Орро	se	President Senate State: IA
	Calendar Year-To-Date Per Election for Office Sought	, , , ,	111679.32		Disbursement For: X Primary General 2016 Other (specify) ▶
	Full Name of Payee				Date of Public Distribution/Dissemination
	YOUTUBE [MEMO ITEM]				12 19 2015
	Mailing Address 901 CHERRY AVE				Amount
	City	State	Zip Code		3793.45
	SAN BRUNO	CA	94066		Transaction ID : SE.108 Date of Disbursement or Obligation
	Purpose of Expenditure DIGITAL MEDIA PRODUCTION/PLACEMENT		Category/ Type	001	12 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Federal Candidate		Supp	ort	Office Sought: House District:00
	RAFAEL 'TED' EDWARD CRUZ		Oppo	ose	President Senate State: IA
	Calendar Year-To-Date Per Election for Office Sought	7 7	115472.77		Disbursement For:
	(a) SUBTOTAL of Itemized Independent Expendit	tures			0.00
	(b) SUBTOTAL of Unitemized Independent Exper	nditures			•
	(a) TOTAL Independent Europeditures				4 1 4 1 4 1 4 1
	(c) TOTAL Independent Expenditures				>
1	Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candocarty committee) any political party committee or	lidate or authorized			
	MR. JON FRANCIS	[Flectron	ically Filed]		M M / D D / Y Y Y Y Y
	Signature	_[Etection:	_	Date	01 31 2016

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MIZED INDEPENDENT EXPENDITURES	PAGE	87	OF	93
	FOR LI	NE 24	OF FO	RM 3X

NAME OF COMMITTEE (In Full) KEEP THE PROMISE III						
ΝE	EEF THE PROMISE III		C C00575423			
Che	ck if 24-hour report 48-hour report New report	ort Amends repo	rt filed on			
Т	Full Name of Payee YOUTUBE		Date of Public Distribution/Dissemination			
	[MEMO ITEM]		12 20 7 2015			
	Mailing Address 901 CHERRY AVE		Amount			
ŀ	City State	Zip Code	3848.62			
- 1	SAN BRUNO CA	94066	Transaction ID : SE.109 Date of Disbursement or Obligation			
	Purpose of Expenditure DIGITAL MEDIA PRODUCTION/PLACEMENT	Category/ Type 001	12 D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
t	Name of Federal Candidate	Support	Office Sought: House District:00			
	RAFAEL 'TED' EDWARD CRUZ	Oppose	President Senate State: IA			
	Calendar Year-To-Date Per Election for Office Sought	119321.39	Disbursement For: Primary General			
ŀ	Full Marca of Pausa		Other (specify)			
	Full Name of Payee YOUTUBE [MEMO ITEM]		Date of Public Distribution/Dissemination 12 21 2015			
ľ	Mailing Address 901 CHERRY AVE		Amount			
ŀ	City.	Zin Codo	2603.13			
	City State SAN BRUNO CA	Zip Code 94066	Transaction ID : SE.111 Date of Disbursement or Obligation			
	Purpose of Expenditure DIGITAL MEDIA PRODUCTION/PLACEMENT	Category/ Type 001	12 / D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
ŀ	Name of Federal Candidate	Support	Office Sought: House District: 00			
	RAFAEL 'TED' EDWARD CRUZ	Oppose	President Senate State:			
	Calendar Year-To-Date Per Election for Office Sought	127064.78	Disbursement For:			
(6	a) SUBTOTAL of Itemized Independent Expenditures		0.00			
(I	b) SUBTOTAL of Unitemized Independent Expenditures		•			
(0	C) TOTAL Independent Expenditures		>			
W	inder penalty of perjury I certify that the independent expenditures ith, or at the request or suggestion of, any candidate or authorized arty committee) any political party committee or its agent.					
	MR. JON FRANCIS [Electroni	cally Filed] Date	01 31 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
	Signature	_ Date				

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EMIZED INDEPENDENT EXPENDITURES PAGE 88 OF 93 FOR LINE 24 OF FORM 3X AME OF COMMITTEE (In Full) KEEP THE PROMISE III FEC IDENTIFICATION NUMBER ▼ C C00575423	CHEDULE E (FEC Form 3X)				
(FEP THE PROMISE III	EMIZED INDEPENDENT EXPENDITURES		 		_
			 I NUM	BER ▼	

KEEP THE PROMISE III				FEC IDENTIFICATION NUMBER V
KEEL THE TROWNOL III				C C00575423
heck if 24-hour report 48-hour report	New rep	oort Amends repo	rt filed on	M / D = D / Y = Y = Y
Full Name of Payee			Date of	Public Distribution/Dissemination
YOUTUBE				M / D D / Y Y Y Y
Mailing Address				12 21 2015
901 CHERRY AVE			Amoun	t
City	State	Zip Code		263.94
SAN BRUNO	CA	94066		tion ID : SE.112 f Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA PRODUCTION/PLACEMENT		Category/ Type 001		12 / 21 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate		X Support	Office Sought:	House District:00
RAFAEL 'TED' EDWARD CRUZ		Oppose	X Presider	
Calendar Year-To-Date Per Election for Office Sought	.,,	127328.72	Disbursement 2016 Oth	For: X Primary General ner (specify) ►
Full Name of Payee	_		Date of	f Public Distribution/Dissemination
YOUTUBE				M / D D / Y Y Y Y
Mailing Address			L	12 22 2015
901 CHERRY AVE			Amoun	t
City	State	Zip Code		1681.50
SAN BRUNO	CA	94066		tion ID : SE.116 f Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA PRODUCTION/PLACEMENT		Category/ Type 001		12
Name of Federal Candidate		Support	Office Sought:	: House District: 00
RAFAEL 'TED' EDWARD CRUZ		Oppose	X Preside	
Calendar Year-To-Date			Disbursement	For: Primary General
Per Election for Office Sought	, , ,	139829.29	2016 Otl	her (specify) -
(a) SUBTOTAL of Itemized Independent Expend	itures		•	0.00
(b) SUBTOTAL of Unitemized Independent Expe	nditures		•	
(c) TOTAL Independent Expenditures			·	7
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any can party committee) any political party committee or	didate or authorized			
MR. JON FRANCIS	[Electron	nically Filed] Date	M M / 01	31 2016
Signature				

TEMIZED INDEPENDENT EXPENDITUR	ES			PAGE 89 OF 93 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			F	EC IDENTIFICATION NUMBER ▼
KEEP THE PROMISE III				C C00575423
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M / D = D / Y = Y = Y = Y
Full Name of Payee			Date of	Public Distribution/Dissemination
YOUTUBE [MEMO ITEM]			1	2 23 2015
Mailing Address 901 CHERRY AVE			Amount	
City	State	Zip Code		734.42
SAN BRUNO	CA	94066		ion ID : SE.119 Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA PRODUCTION/PLACEMENT		Category/ Type 001	M	
Name of Federal Candidate		Support	Office Sought:	House District:00
RAFAEL 'TED' EDWARD CRUZ		Oppose	Presiden	Trouse District.
Calendar Year-To-Date Per Election for Office Sought	7 7	143246.44	Disbursement 2016 Oth	For:
Full Name of Payee YOUTUBE [MEMO ITEM] Mailing Address 901 CHERRY AVE			Date of	Public Distribution/Dissemination
City SAN BRUNO	State CA	Zip Code 94066		1657.41 tion ID : SE.124
Purpose of Expenditure DIGITAL MEDIA PRODUCTION/PLACEMENT		Category/ Type 001	M	Disbursement or Obligation M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate		X Support	Office Sought:	House District: 00
RAFAEL 'TED' EDWARD CRUZ		Oppose	X Presiden	
Calendar Year-To-Date Per Election for Office Sought		145769.02	Disbursement 2016 Oth	For:
(a) SUBTOTAL of Itemized Independent Expend	itures			0.00
(b) SUBTOTAL of Unitemized Independent Expe	nditures		· •	7
(c) TOTAL Independent Expenditures			· •	4-14-14-14-1
Under penalty of perjury I certify that the indepe with, or at the request or suggestion of, any can party committee) any political party committee or	didate or authorized			
MR. JON FRANCIS	[Electron	ically Filed]	01 /	31 2016
Signature		Date		2010

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CHEDULE E (FEC Form 3X) EMIZED INDEPENDENT EXPENDITURES						
			90	OF	93	
		FOR LI	NE 24	OF F	ORM 3	>
AME OF COMMITTEE (In Full)	FEC II	DENTIFIC	CATIO	NUN P	IBER 1	,
(EEP THE PROMISE III		_	-			

NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
KEEP THE PROMISE III		C C00575423
Check if 24-hour report 48-hour report New rep	oort Amends repo	rt filed on
Full Name of Payee		Date of Public Distribution/Dissemination
YOUTUBE [MEMO ITEM]		12 24 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 901 CHERRY AVE		Amount
City State	Zip Code	2674.11
SAN BRUNO CA	94066	Transaction ID : SE.125 Date of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA PRODUCTION/PLACEMENT	Category/ Type 001	12 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	Support	Office Sought: House District: 00
RAFAEL 'TED' EDWARD CRUZ	Oppose	President Senate State: IA
Calendar Year-To-Date Per Election for Office Sought	148443.13	Disbursement For: X Primary General 2016 Other (specify) ▶
Full Name of Payee		Date of Public Distribution/Dissemination
YOUTUBE [MEMO ITEM]		12 25 2015
Mailing Address 901 CHERRY AVE		Amount
City State SAN BRUNO CA	Zip Code 94066	Transaction ID : SE.128
Purpose of Expenditure DIGITAL MEDIA PRODUCTION/PLACEMENT	Category/ 001	Date of Disbursement or Obligation
	Type	
Name of Federal Candidate	X Support	Office Sought: House District: 00
RAFAEL 'TED' EDWARD CRUZ	Oppose	President Senate State: IA
Calendar Year-To-Date Per Election for Office Sought	156568.33	Disbursement For: Primary General 2016
Tel Election of Cinec Sought		Other (specify) -
(a) SUBTOTAL of Itemized Independent Expenditures		0.00
(b) SUBTOTAL of Unitemized Independent Expenditures		>
(c) TOTAL Independent Expenditures		•
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		
MR. JON FRANCIS [Electron	nically Filed] Date	01 31 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	Date	

MR. JON FRANCIS

Signature

	CHEDULE E (FEC Form 3				
Т	EMIZED INDEPENDENT EXPEN	DITURES		PAGE 91 FOR LINE 2	OF 93 24 OF FORM 3X
N	AME OF COMMITTEE (In Full)			FEC IDENTIFICATION	
ł	KEEP THE PROMISE III			C C00575423	
CI	heck if 24-hour report 48-hour	r report New rep	port Amends repo	rt filed on	YIYIY
	Full Name of Payee			Date of Public Distribution	/Dissemination
	YOUTUBE [MEMO ITEM]			12 26 /	2015
	Mailing Address 901 CHERRY AVE				20.0
	33.3			Amount	
	City	State	Zip Code		2597.67
	SAN BRUNO	CA	94066	Transaction ID : SE.130 Date of Disbursement or 0	Obligation
	Purpose of Expenditure DIGITAL MEDIA PRODUCTION/PLACE	EMENT	Category/ Type 001	12 26	2015
	Name of Federal Candidate		Support	Office Sought: House	District: 00
	RAFAEL 'TED' EDWARD CRUZ		Oppose	President Senate	State:IA
	Calendar Year-To-Date Per Election for Office Sought		164581.24	Disbursement For: ☐ Primary 2016 ☐ Other (specify) ▶	General
	Full Name of Payee			Date of Public Distribution	/Dissemination
	YOUTUBE [MEMO ITEM]			M M / D D /	2015
	Mailing Address 901 CHERRY AVE			Amount	
	O'h.	Otata	7:a Cada		2900.52
	City SAN BRUNO	State CA	Zip Code 94066	Transaction ID : SE.133	
	Purpose of Expenditure		Category/	Date of Disbursement or 0	Obligation
	DIGITAL MEDIA PRODUCTION/PLACE	EMENT	Type 001	12 27	2015
	Name of Federal Candidate		X Support	Office Sought: House	District:00
	RAFAEL 'TED' EDWARD CRUZ		Oppose	Y President Senate	State: IA
	Calendar Year-To-Date		173558.26	Disbursement For: X Primary	/ General
	Per Election for Office Sought		170300.20	Other (specify)	
	(a) SUBTOTAL of Itemized Independent	Expenditures		·	0.00
	(b) SUBTOTAL of Unitemized Independ	ent Expenditures		· •	
	(c) TOTAL Independent Expenditures			•	
	Under penalty of perjury I certify that th with, or at the request or suggestion of, party committee) any political party committee	any candidate or authorized	•		·

[Electronically Filed]

2016

31

01

Date

	CHEDULE E (FEC Form 3) EMIZED INDEPENDENT EXPEND				PAGE 92 OF 93 FOR LINE 24 OF FORM 3X
N/	AME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
	EEP THE PROMISÉ III				C C00575423
Ch	neck if 24-hour report 48-hour r	eport New re	port Amends repo	ort filed	d on M M M / D D / Y Y Y Y Y
	Full Name of Payee YOUTUBE [MEMO ITEM] Mailing Address 901 CHERRY AVE				Date of Public Distribution/Dissemination 12 / 28 / 2015 Amount
	City SAN BRUNO	State CA	Zip Code 94066		3139.62 Transaction ID : SE.136 Date of Disbursement or Obligation
	Purpose of Expenditure DIGITAL MEDIA PRODUCTION/PLACEM	IENT	Category/ Type 001		12 28 2015
	Name of Federal Candidate RAFAEL 'TED' EDWARD CRUZ		Support Oppose		ce Sought: House District: 00 President Senate State: IA
	Calendar Year-To-Date Per Election for Office Sought		182204.27	Disbi 2016	oursement For: Primary General Other (specify) Other
	Full Name of Payee YOUTUBE [MEMO ITEM] Mailing Address 901 CHERRY AVE				Date of Public Distribution/Dissemination 12 30 2015 Amount
	City SAN BRUNO	State CA	Zip Code 94066		3146.56 Transaction ID : SE.138 Date of Disbursement or Obligation
	Purpose of Expenditure DIGITAL MEDIA PRODUCTION/PLACEN	1ENT	Category/ Type 001		M M / 29 / Y Y Y Y Y 2015
	Name of Federal Candidate RAFAEL 'TED' EDWARD CRUZ		Support Oppose		ce Sought: House District: 00 President Senate State: IA
	Calendar Year-To-Date Per Election for Office Sought		190599.10	Disb 2016	oursement For: Primary General Other (specify) Other
	(a) SUBTOTAL of Itemized Independent E	expenditures		▶	0.00
	(b) SUBTOTAL of Unitemized Independent	•			
	(c) TOTAL Independent Expenditures			·· •	
	Under penalty of perjury I certify that the	independent expenditure	s reported herein were	not m	nade in cooperation, consultation, or concert

with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

MR. JON FRANCIS	[Electronically Filed]	Date	01 /	31	/	2016	
Signature							

SCHEDULE E (FEC ITEMIZED INDEPENDEN						PAGE 93	OF 93
NAME OF COMMITTEE (I. F.	.IIV					FOR LINE 2	4 OF FORM 3X
NAME OF COMMITTEE (In FI					FEC	IDENTIFICATIO	ON NUMBER ▼
REEL THE FROMIC	·L III				С	C00575423	
Check if 24-hour report	48-hour report	New repo	ort Amends r	eport filed	d on	/ D D /	Y = Y = Y = Y
Full Name of Payee					Date of Pub	lic Distribution/	Dissemination
YOUTUBE [MEMO ITEM]					12	/ 30 /	2015
Mailing Address	RRY AVE				. 12	30	2013
901 CHE	RRY AVE				Amount		
City		State	Zip Code				3072.55
SAN BRUNO		CA	94066		Transaction I Date of Disk	D: SE.140 oursement or C	bligation
Purpose of Expenditure DIGITAL MEDIA PRODUC	TION/PLACEMENT		Category/ Type 0	01	12	30	2015
Name of Federal Candidat	e		X Suppor	t Offic	e Sought:	House	District: 00
RAFAEL 'TED' EDWARD (CRUZ		Oppose		President	Senate	State: IA
Calendar Year-To-Date Per Election for Office		, , ,	198974.40	Disb 2016		Primary pecify) ▶	General
Full Name of Payee						lic Distribution/	Dissemination
YOUTUBE [MEMO ITEM]					12	/ D D /	2015
Mailing Address 901 CHE	RRY AVE				Amount		
City		State	Zip Code				3014.01
SAN BRUNO		CA	94066		Transaction Date of Disk	ID : SE.144 oursement or C	Obligation
Purpose of Expenditure DIGITAL MEDIA PRODUC	TION/PLACEMENT		Category/ Type 0	01	12	31	2015
Name of Federal Candida	e		Suppor	rt Offic	e Sought:	House	District: 00
RAFAEL 'TED' EDWARD (CRUZ		Oppose		President	Senate	State: IA
Calendar Year-To-Date Per Election for Office		,	205529.30	Disb 2016		Primary Specify) ▶	General
(a) SUBTOTAL of Itemized	Independent Expenditures	S		····· >	-7	7	0.00
(b) SUBTOTAL of Unitemiz	ed Independent Expenditu	ıres		····· >		7	
(c) TOTAL Independent Ex	penditures			······ >		7	0.00
Under penalty of perjury I owith, or at the request or suparty committee) any political	iggestion of, any candidate	e or authorized					
MR. JON FRAN	CIS	[Electron	ically Filed]	Date (D1 / D1 1	2010	у у у 6